Suaahara Process Evaluation Policy Environment and Government Structures (PEGS) Study

November, 2015







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The *Suaahara* Process Evaluation Policy Environment and Government Structures (PEGS) study was conducted by Health Research and Social Development Forum (HERD) for *Suaahara* and supported by Save the Children, Nepal Country Office. The opinions expressed herein are those of the authors and do not necessarily reflect the views of the *Suaahara* or Save the Children.

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Study team

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LIST OF ACRONYMS AND ABBREVIATIONS

ADS Agriculture Development Strategy
AFSP Agriculture and Food Security Project

ANC Antenatal Care

ASC Agriculture Service Center

BCC Behaviour Change Communication

BMI Body Mass Index

CAC Citizen Awareness Centre CHD Child Health Division

DADO District Agriculture Development Office

DAG Disadvantaged Group

DDC District Development Committee

DEO District Education Office
D(P)HO District (Public) Health Office
DLSO District Livestock Service Office

DNFSSC District Nutrition and Food Security Steering Committee

DoA Department of Agriculture
DoE Department of Education
DoHS Department of Health Services
DoLS Department of Livestock Services

DR Document review

DWSSO District Water, Sanitation and Supply Office

EHA Essential Hygiene Actions ENA Essential Nutrition Actions

EPI Expanded Program on Immunization FCHVs Female Community Health Volunteers

FHD Family Health Division FLW Frontline Worker

FNSP Food and Nutrition Security Plan

FS Field Supervisor

FWDR Far Western Development Region

GoN Government of Nepal

HERD Health Research and Social Development Forum

HFP Homestead Food Production

HFOMC Health Facility Operations and Management Committee

HKI Helen Keller International

HLNFSSC High level Nutrition and Food Security Steering Committee

HTSP Healthy Timing and Spacing of Pregnancy

IDI In-depth Interview

IEC Information Education and Communication IFPRI International Food Policy Research Institute

IG Intensive Governance

IMCI Integrated Management of Childhood Illness INGO International Non-Government Organization

IPC Integrated Planning Committee

IR Intermediate Result

IYCF Infant and Young Child Feeding

JHUCCP Johns Hopkins University Center for Communication Programs

:

LDO Local Development Officer
LQAS Lot Quality Assurance Sampling

LSC Livestock Service Centre

MDGs Millennium Development Goals

MoE Ministry of Education MoF Ministry of Finance

MoFALD Ministry of Federal Affairs and Local Development

MoHP Ministry of Health and Population MoUD Ministry of Urban Development MSNP Multi-sector Nutrition Plan

NAGA Nutrition Assessment and Gap Analysis
NDHS Nepal Demographic Health Survey

NeWaH Nepal Water for Health

NGO Non-government Organization NHRC Nepal Health Research Council NPC National Planning Commission

NPCS Nutrition Promotion and Consultancy Service

NTAG Nepali Technical Assistance Group

ODF Open Defecation Free

PEAP Program Exposure and Adoption of Practices
PEGS Policy Environment and Government Structures

PIP Program Impact Pathways

PNC Postnatal Care

RAD Regional Agriculture Directorate
REO Regional Education Office

RHD Regional Health Directorate

RNFSSC Regional Nutrition and Food Security Steering Committee

R-WASH-CC Regional Water, Sanitation and Hygiene Coordination Committee

SC Save the Children
SM Social Mobiliser
SUN Scaling up Nutrition

USAID United States Agency for International Development

VDC Village Development Committee

VNFSSC VDC Nutrition and Food Security Steering Committee

V-WASH-CC Village WASH Coordination Committee

WASH Water, Sanitation and Hygiene

WCF Ward Citizen Forum

EXECUTIVE SUMMARY

The *Suaahara* Process Evaluation Policy Environment and Government Structures (PEGS) study was conducted to understand how Nepal's policy environment and government structures at different levels facilitate or affect coordination of nutrition-related sectors against the backdrop of Nepal's newly introduced Multi-sector Nutrition Plan (MSNP). The study further aimed to explore how these structures relate to the implementation of integrated nutrition programs, such as *Suaahara*, and also how *Suaahara* coordinates with, and influences the policy environment and government structures. *Suaahara* aims to support and strengthen the coordination among different bodies at the national, regional, district, Village Development Committee (VDC), and ward levels on nutrition and nutrition-related issues. This study evaluated and documented the mechanisms of coordination at national and sub national levels and the challenges and barriers for the same.

The PEGS study was a qualitative study conducted at the national, regional, district, and VDC levels. National level data was collected in the Kathmandu valley, while the regional level data was collected from Doti and Dhangadhi in the Far-Western Development Region (FWDR) and Pokhara in the Western Development Region (WDR). The district level data collection was conducted in 3 *Suaahara* intervention districts: Darchula, Rupandehi, and Sindhupalchowk. 2 VDCs, 1 intensive governance (IG) and 1 non-intensive governance (non-IG) VDC was selected from each district; therefore, VDC level data was collected from 6 VDCs in total.

Study methods included in-depth interviews (IDIs) (n=128) and document review (DR) (n=882). The data were collected from government representatives, *Suaahara* partner organizations, and *Suaahara* itself. The IDIs were transcribed in Nepali and translated into English. Data coding was done using Atlas.ti software and the outputs generated were analyzed. The documents collected (both in print and electronic) were manually coded and then analyzed.

Most participants from national to VDC level had only a basic understanding of the MSNP. The functionality of the Nutrition and Food Security Steering Committees (NFSSC) varied: regional level committees were almost non-functional whereas district and VDC level committees had held irregular meetings where they discussed nutrition, and specifically nutrition of 1000 day mothers and children. Most district and VDC level committee meeting activities were related to *Suaahara*, as *Suaahara* would present its activities, share annual plans, disseminate survey findings, and so on. There were hardly any differences in the activities and understanding among the participants in *Suaahara*'s IG and non-IG VDCs.

The Water, Sanitation and Hygiene Coordination Committees (WASH-CC) were found to be very active from the regional to VDC levels. They are mainly focused on achieving Open Defecation Free (ODF) status to achieve the national ODF goal by 2017; this involves strategizing ODF campaigns,

mobilizing resources for construction of toilets, and promoting optimal sanitation behavior.

Almost all participants acknowledged and appreciated *Suaahara* for its contribution in improving coordination between different sectors working on nutrition. The participants mentioned that the program has created opportunities to come together for nutrition and learn about one another's work. They have also attributed meeting regularity of multi-sectoral bodies to *Suaahara'a* support.

Even though a significant number of participants mentioned improved coordination, they also highlighted the challenges of multi-sector coordination. The participants mainly mentioned issues related to ownership of the MSNP, frequent staff transfers, unfulfilled position (especially at the regional level), lack of elected representatives at district and VDC levels, and therefore increased workloads of the government staff, and so on.

At the VDC level, almost all the governance bodies were found to be functional, although some were comparatively very active and some less active. All 6 CACs were found to be functional in terms of regularity of meetings and participation in the VDC planning process. However, the IG VDCs in all 3 districts were found to be more active and discussed more about nutrition than those in non-IG VDCs. In contrary, participants from both IG and non-IG VDCs in Sindhupalchowk reported that while they conducted discussions on various issues regularly, they did not participate in the VDC planning process. CAC meeting minutes collected from the VDCs confirmed these IDI based findings.

In the Ward Citizen Forum (WCF) and Integrated Planning Committee (IPC), no clear distinction was observed between the IG and non-IG VDCs from either the IDIs or the documents collected. A high majority of the WCF members in all 3 districts reported that their WCFs were functional; that they were responsible for everything going on in their wards, including problems and possible solutions to the problems in their village. The WCF put forth their demands to the IPC and many were prioritized by the IPC and addressed by the VDC Council.

The IPC members mentioned sectorally categorizing the needs, ranking them using a guideline and then formulating integrated plans before passing them to the VDC Council. Many VDC level participants mentioned that the VDC Council discussed the integrated plans and allocated funds.

A high majority of the VDC level participants reported that the budget allocated by the VDC Council had a major focus on physical infrastructure including construction of roads, buildings, drinking

water stations, and so on. A few participants reported that in the health sector, funds were sometimes allocated for stretchers, health facility construction, incentives for institutional delivery, and incentives for Female Community Health Volunteers (FCHVs), and so on. Many mentioned that for WASH, funds were mostly allocated for ODF; substantial funding and effort was being made both by *Suaahara* and the VDC to declare villages ODF. Many VDC level and a few district level participants also reported that a small amount of the budget was allocated for conducting nutrition demonstrations and for seed distribution to the 1000 day mothers; participants clearly stated that budget allocation for nutrition had been initiated since the start of *Suaahara*.

Many participants shared their understanding of *Suaahara* as an integrated multi-sectoral program that worked to reduce malnutrition among 1000 day mothers and children below 2 years of age. Many participants were aware of *Suaahara* and noted its contribution to increased nutrition and sanitation related awareness. *Suaahara* was found to be working on WASH, nutrition, agriculture, and so on and mainly focused on the promotion of production and consumption of foods from at least four food groups at the community level.

Study participants identified some challenges for *Suaahara* including ownership issues at the national, regional, and district levels, programmatic issues such as difficulties with distribution of chicken and vegetable seeds, at the VDC level. Some participants have suggested that this program should come through the government's (GoN) Redbook to increase ownership among government stakeholders. Some participants recommended that *Suaahara* improved coordination as they felt that *Suaahara*'s coordination across sectors has been weaker than expected.

There was great understanding about *Suaahara* and its activities at all levels from national to VDC and the program has been appreciated for its role in not just promoting nutrition sensitive and nutrition specific actions to promote nutritional status of 1000 day mothers and children, but also in mainstreaming the nutrition agenda in different government structures and in communities. *Suaahara* has been very strong reasons why different sectors started working together on nutrition and has improve coordination among the different sectors. However, there is a known risk of overreliance and shifting of responsibilities onto *Suaahara*, rather than the government, for the coordination and implementation of all nutrition activities. It is crucial that the government own the implementation of the MSNP and that continuous reinforcement mechanism and capacity building measures be in place to create ownership of the plan at all levels by government actors.

CHAPTER 1: INTRODUCTION

1.1 Background

Nepal, a land locked under-developed nation, has a population of more than 27 million with around 31% living below the poverty level. Maternal and Child Health (MCH) have significantly improved in Nepal in the move towards achieving several Millennium Development Goals (MDGs). Still, Nepal has one of the highest prevalence of child under-nutrition in the world with 41% stunted, 11% wasted, and 29% underweight (Nepal Demographic and Health Survey (NDHS), 2011). Maternal under-nutrition has been a long term problem in Nepal where high proportions of women of reproductive age are found to have low Body Mass Index (BMI<18.5 kg/m2) and low height for (Department of Health Services (DoHS), n.d.). Nepal has reduced the prevalence of anemia among women of reproductive age (15-49) by almost half from 68% in 1998 to 38% in 2011 but the rates of anemia was high among the pregnant women (48%) (NDHS, 2011). Some of the causes of malnutrition in Nepal include poor feeding and care practices, insufficient nutrient intake, high rates of infection, and poverty (NDHS, 2011).

It has been identified that under-nutrition reduces a nation's economic advancement by at least 8% because of direct productivity losses, losses via poorer cognition, and losses via reduced schooling ("Executive Summary", 2013). Therefore, nutrition is gaining popularity on the global development agenda, with a prioritization of the first 1000 days, the period from conception to a child's second birthday. Good nutrition and healthy growth during this crucial period will have lasting benefits throughout life. Great attention and prioritization globally is being called for national nutrition programs, stronger integration with health programs, enhanced inter-sectoral approaches, and more focus and coordination in the global nutrition system of international agencies, donors, academia, civil society, and the private sector. (*ibid*)

A multi-sector approach has been identified as essential to addressing the issue of malnutrition in Nepal (Nutrition Assessment and Gap Analysis (NAGA), 2009). Although recommended, a multi-sector approach is equally challenging. The national and sub-national level human resources, in these sectors, lack the knowledge and capacity for implementation (Nepal National and District Nutrition Capacity Assessment, 2012). Other barriers include the government's inability to implement a unified nutrition policy as there is the variety of funding mechanisms and timelines between donors and the governments; there are more frequent than usual staff changes for key posts within each sector as a result of Nepal's political instability. At the same time, the budget

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planning and work plan has been affected by the political variability at the district level. In addition, there is need to develop timely monitoring and evaluation systems (Houston, et al, 2014).

Numerous international and national plans, policies, and strategies currently guide the efforts to combat malnutrition in Nepal. Based on the findings of the NAGA study, the Government of Nepal (GoN) formulated the Multi-Sector Nutrition Plan (MSNP) for accelerated reduction of maternal and child under-nutrition in Nepal (National Planning Commission (NPC), 2012). The MSNP, led by the NPC was prepared in close collaboration with five ministries: Ministry of Agriculture and Development (MoAD), Ministry of Health and Population (MoHP), Ministry of Education (MoE), Ministry of Urban Development (MoUD), and Ministry of Federal Affairs and Local Development (MoFALD).

The long-term goal of the MSNP is to reduce chronic malnutrition so as to enhance human capital for overall socio-economic development. The goal for the next 5 years is to improve maternal and child nutrition by reduction in maternal and child under-nutrition. The ministries are mainly responsible for mainstreaming nutrition in sectoral programs, mobilization of resources and implementation through their regional and district networks, providing technical backstopping and carrying out monitoring and evaluation of the implementation process.

Nepal's commitment to addressing the issue of malnutrition is visible in its engagement in the global Scaling up Nutrition (SUN) movement which includes 2 strategic approaches: rapid scaling up of specific nutrition intervention of proven effectiveness and implementation of sectoral strategies that are nutrition sensitive.

With the global push to address nutrition with a multi-sector approach and Nepal's various sectoral policies addressing nutrition complimenting the MSNP, USAID in consultation with MoHP and other partners designed an integrated nutrition program for Nepal, *Suaahara*. *Suaahara* is a USAID funded 5 year (2011-2016) program that works to improve the health and nutritional status of pregnant and lactating women and children less than 2 years of age through nutrition-specific and nutrition-sensitive interventions, including integration of various sectors - nutrition; Water, sanitation, and Hygiene(WASH); agriculture; and health. Originally operating in 20 districts, *Suaahara* expanded its interventions to cover 41 districts of Nepal by the end of 2015. Implemented in partnership with the GoN, *Suaahara*, is designed and implemented by a partnership including Save the Children (SC), Helen Keller International (HKI), JHPIEGO, Johns Hopkins Bloomberg School of Public Health Center for Communication Programs (JHUCCP), Nepal Water for Health (NeWaH),

Nutrition Promotion and Consultancy Service (NPCS), and Nepali Technical Assistance Group (NTAG)

Suaahara focuses on improving health and nutrition behaviors at the household level through the promotion of Essential Nutrition Actions (ENA) and Essential Hygiene Actions (EHA), with particular attention to improving Infant and Young Child Feeding (IYCF) knowledge and practices. Suaahara also focuses on addressing other determinants of under-nutrition, such as poor availability of and access to food, lack of quality health care services, unawareness of critical messages regarding healthy timing and spacing of pregnancies (HTSP), inadequate facilities and practices related to WASH, and socio-cultural factors including gender equality and social inclusion (GESI). Suaahara supports the GoN to institute nutrition-specific and nutrition-sensitive interventions and policies aiming towards achievement of goals set out in the National Nutrition Action Plan. Suaahara assists the government to build the capacity of district and sub-district level government workers from various sectors including district development, health, agriculture, livestock services, WASH, and to some extent education and women's development. This collaboration includes the facilitation of cross-sectoral collaboration to address community level challenges and to enhance the understanding of all as to the causes of under-nutrition and how each sector plays a role in addressing the pervasive problem of under-nutrition.

Suaahara aims towards accomplishing 4 Intermediate Results (IRs):

- IR1: Household health and nutrition behaviors improved;
- IR2: Women and children increase their use of quality nutrition and health services;
- IR3: Women and their families increase their consumption of diverse and nutritious food; and
- IR4: Coordination on nutrition between government and other actors is strengthened.

Suaahara's largest footprint is at the Village Development Committee (VDC) level where a cadre of frontline workers (FLWs) including Suaahara's own field supervisors working for local organizations and government staff and volunteers are Suaahara's primary modality to reach 1000 day mothers. However, in order to accomplish IR4 and to use IR4 to promote gains throughout IR1, IR2, and IR3, Suaahara works through and with Nepal's policies and government structures.

At the national level, *Suaahara* collaborates with the government and other key stakeholders to build capacity, awareness, and commitment to investing in nutrition through stronger policies, strategies, and guidelines. *Suaahara* conducts technical meetings and briefings on prioritized

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nutrition topics aiming to raise awareness and stimulate discussions to support policies, norms, and guidelines for improved nutrition. *Suaahara* has been working collaboratively with line ministries to revise policies, guidelines, curriculums, and information education and communication (IEC) materials to be nutrition sensitive and address GESI issues.

At the regional level, *Suaahara* collaborates with Regional Health Directorate (RHD), Regional Agricultural Directorate (RAD), and Regional Water, Sanitation and Hygiene Coordination Committee (R-WASH-CC) to strengthen health and agricultural systems and promote hygiene and sanitation for nutrition. *Suaahara* also facilitates the formation of Regional Nutrition and Food Security Steering Committees (RNFSSC).

At the district level, *Suaahara* works with district level government departments to generate support for, plan, and budget for nutrition-specific and nutrition-sensitive interventions, i.e. those related to agriculture and WASH. *Suaahara* also facilitates the formation of District Nutrition and Food Security Steering Committee (DNFSSC).

At the VDC and ward level, *Suaahara* focuses on improving service providers' capacity through trainings, to support communities to improve family actions on nutrition in addition to formation of co-ordination mechanism like VDC Nutrition and Food Security Steering Committee (VNFSSC). *Suaahara* also advocates for local resources mobilization for nutrition programs at these levels.

1.2 Study Rationale

The International Food Policy Research Institute (IFPRI) is conducting an impact evaluation of *Suaahara*. The impact evaluation design is quasi-experimental involving collection of baseline and end line¹ data from *Suaahara* intervention districts and matched comparison districts, with household level matching planned during analysis. A difference-in-difference approach was planned to estimate *Suaahara's* impact. The baseline data collection, completed in 2012, included 3 types of surveys: 1) mothers and other family members in households with children 0-59 months of age, 2) Female Community Health Volunteers (FCHVs) and 3) community leaders. In household interviews, maternal and child anthropometric and hemoglobin data were also collected.

In addition, *Suaahara* has several ongoing monitoring activities. Routine data, collected quarterly by *Suaahara* field supervisors (FSs) provides mostly output level data. This data includes information about community level activities, training activities, home visits, and distribution of

¹ Endline was planned but might not be taking place because of the devastation caused by the April 25 earthquake in several of the survey districts.

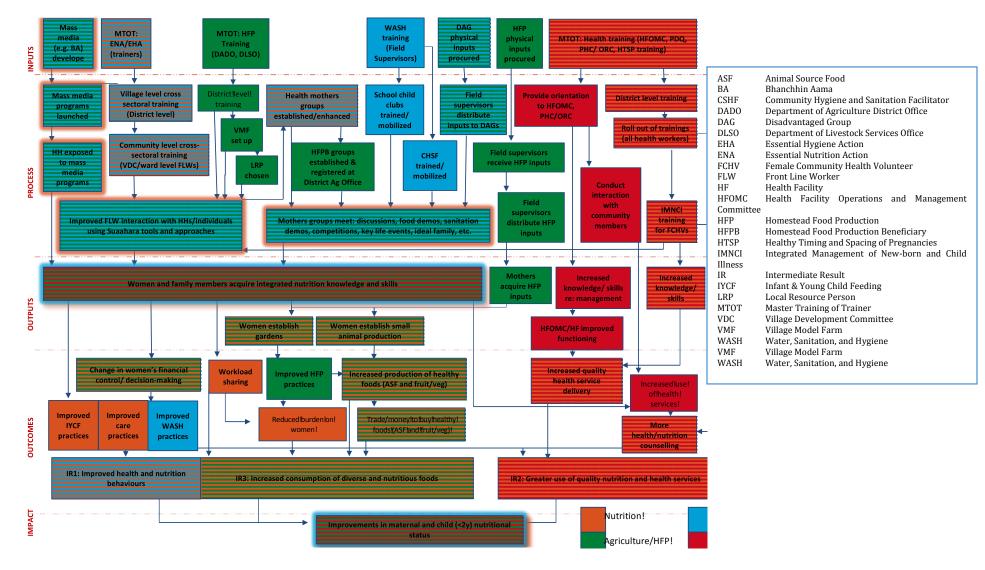
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goods such as chickens and seed. Therefore, much is known about *Suaahara* activities and outputs, for example, the number of people that have been trained or the number of episodes of the radio drama that have aired. Additionally, *Suaahara* uses Lot Quality Assurance Sampling (LQAS) methodology for outcome monitoring in all districts, to facilitate annual reporting to USAID on outcomes, such as mothers' knowledge and behaviors. The LQAS methodology also allows *Suaahara* to use the data internally to identify districts that are not meeting performance criteria and follow up. Because the LQAS includes many lots (over 100 total), the overall sample size is large enough to obtain precise point estimates to identify trends in outcomes over the life of the program.

Thus, Suaahara has both a robust system for outcome monitoring and a strong quasi-experimental impact evaluation in order to produce rigorous evidence of impact. Together, the annual LQAS surveys and the evaluation provide substantial information about program outputs and its effectiveness in achieving its nutritional objectives. However, Suaahara's monitoring and evaluation system provides little information about whether and how Suaahara interventions are being implemented by village level government bodies and whether public sector front line workers are using the knowledge, skills and materials provided by Suaahara to provide better services to Suaahara target households, as expected. Given how highly dependent Suaahara is on FLW and existing government structures operating as expected, a need was felt for an evaluation of the Suaahara implementation processes to complement existing monitoring and evaluation efforts and fill knowledge gaps related to why and how complex agriculture, health and nutrition programs do or do not achieve their intended outcomes.

Thus, a *Suaahara* process evaluation was designed with a primary objective of documenting the processes by which the impacts are achieved and assessing which elements of the program work. The process evaluation advances understanding about whether, how, and why the *Suaahara* intervention is being implemented as planned and program components being utilized. It also helps *Suaahara* identify weaknesses in the current design with enough time to make mid-course corrections to the program and achieve high-level impacts. This process evaluation is based on the "theories of change" model, which maps the ways in which the flow from interventions through impact is anticipated using program impact pathways (PIP). *Suaahara* created 2 detailed PIPs to describe how each step of the *Suaahara* program is anticipated to influence the 4 IRs and in turn, maternal and child nutritional status, the primary impact indicator. One PIP covers the first 3 IRs (Figure 1) and the other is only for IR4 (Figure 2).

Figure 1: Suaahara Program Impact Pathways for IRs 1-3



INPUTS Contribute to strategy development (NHSP III, IYCF); provide technical support (WASH-(ODF), nutrition (MIYCN manual), implementation of National Hygiene and Sanitation master plan Management Facilitation for formation and Dissemination of MSNP Joint Monitoring/review conducted training to Vorientation/training and regularization WASH CC of government structure Social mobiliser facilitate DHO, DADO, DLSO, DNFSSC, ASC, LSC V-WASH-CC and Dand mobilized to support DNFSSC, VNFSSC formed and recommend allocation VNFSSC, HFOMC, WCF, CAC local resource mobilized to WASH -CC mobilized to OUTPUT mobilization process e.g. of resources sensitized on MSNP monitor HFP support ODF VDC block grant IR4: Improved co-ordination on nutrition between government and other actors OUTCOME Allocate VDC block District offices allocate Functional government resources for nutrition structures/committees grant process IMPACT Improvements in maternal and child (<2 y) nutritional status

Figure 2: Suaahara Program Impact Pathway for IR4

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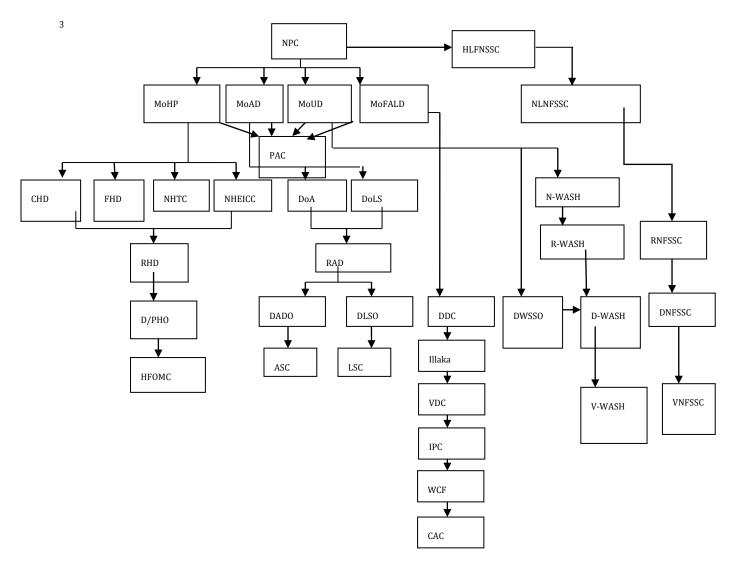
Based on the PIPs, 3 process evaluation studies were designed and carried out: 1) Program Exposure and Adoption of Practices (PEAP); 2) Frontline Workers (FLW); and 3) Policy Environment and Governance Structures (PEGS). PEAP was a household-level quantitative study which assessed program reach and utilization, whereas FLW and PEGS were studies designed to assess program delivery.

This report covers only the PEGS study, which is focused on IR4: strengthened co-ordination between government and other actors on nutrition. *Suaahara* aims to support and strengthen coordination among different bodies at the national, regional, district, VDC, and ward levels on nutrition and nutrition-related issues. This includes coordination with government bodies at different levels and formation of committees and groups to mobilize commitment to improving

² NHSP: Nepal Health Sector Programme, IYCF: Infant Young and Child Feeding, MIYCN: Maternal Infant and Young Child Nutrition,

the nutritional status of women and children at the community level. This study evaluates the processes used and the extent of coordination at different levels of government structures, as well as other agencies and groups working to improve nutritional status. Figure 3 represents different government structures through which *Suaahara* operates and contributes to strengthening co-ordination mechanisms for nutrition.





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³ ASC: Agriculture Service Center, CAC: Citizen Awareness Center, CHD: Child Health Division, DADO: District Agriculture Development Office, DDC: District Development Committee, DLSO: District Livestock Service Office, DNFSSC: District Nutrition and Food Security Steering Committee, DOA: Department of Agriculture, DoLS: Department of Livestock Service, D/PHO: District/Public Health Office, DWASH: District Water, Sanitation and Hygiene, DWSSO: District Water, Sanitation and Supply Office, FHD: Family Health Division, HFOMC: Health Facility Operation and Management Committee, HLFNSSC: High Level Nutrition and Food Security Steering Committee, IPC: Integrated Planning Committee, LSC: Livestock Service Center, MoA: Ministry of Agriculture, MoFALD: Ministry of Federal Affairs and Local Development, MoHP: Ministry of Health and Population, LSC: Livestock Service Center, MOUD: Ministry of Urban Development, NHEICC: National Health Education, Information, and Communization Center, NHTC: National Health Training Center, NLNFSSC: National Level Nutrition and Food Security Steering Committee, NPC: National Planning Commission, N-WASH: National Water, sanitation and Hygiene, PAC: Project Advisory Committee, RAD: Regional Administrative Directorate, RHD: Regional Health Directorate, RNFSSC: Regional Nutrition and Food Security Steering Committee, V-WASH: Village Water, Sanitation and Hygiene, and WCF: Ward Citizen Forum

1.3 Study Objectives

The overall objective of the PEGS study was to improve our understanding of how Nepal's policy environment and government structures at different levels affect the coordination and implementation of integrated nutrition programs, such as *Suaahara*, and also how *Suaahara* coordinates with and influences these policy environment and government structures. A conceptual framework was developed for this study:

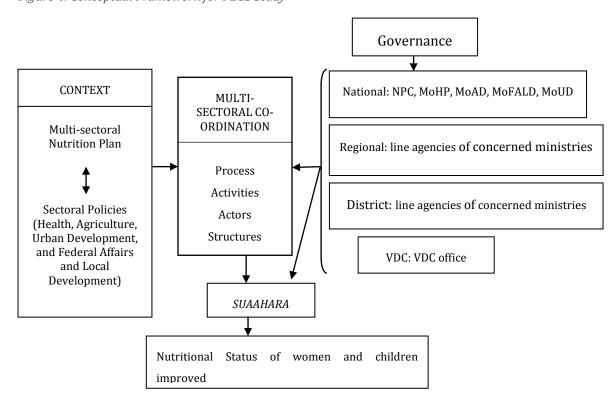


Figure 4: Conceptual Framework for PEGS Study

Specific objectives of the PEGS study were:

- To understand the roles and responsibilities of multi-sectoral bodies at national, district, and sub-district levels towards nutrition and how these bodies function and coordinate
- To understand Suaahara's contribution to facilitating better coordination for nutrition among government structures at national, district, and sub-district levels
- To discover facilitators and barriers/challenges of coordination among different bodies involved in nutrition programming, including during implementation
- To document the process through which policies, plans, and budgets are designed and implemented for promotion of health and nutrition at national, district, and sub-district levels.

CHAPTER 2 METHODOLOGY

2.1 Study Details

This study was conducted at the following national, regional, district, and VDC sites, selected by the *Suaahara* team: national data from the Kathmandu valley; regional data from Doti and Dhangadhi (FWDR) and Pokhara (WDR); district data from 3 *Suaahara* intervention districts - Darchula, Rupandehi, and Sindhupalchowk; and 2 VDCs per district, 1 Intensive Governance (IG) and 1 Non-Intensive Governance (non-IG) VDC.

This qualitative study employed 2 data collection methods: In-depth interviews (IDIs) and document review (DR). IDIs were conducted with key informants from government and non-government organizations at the central, regional, district, and VDC levels (*Annex 2*), using semi-structured interview guides (*Annex 3*). For document review, the following were collected: meeting minutes of coordinating committees, letters, work plans, and any document evidencing nutrition activities, particularly those with *Suaahara* or government involvement.

A total of 128 IDIs were conducted at the national and sub-national levels. The national level participants (18) included government stakeholders of multiple sectors and representatives from planning/ governance bodies, *Suaahara* partner agencies, *Suaahara* representative at its national office, and 2 prominent personalities with commendable contribution to the MSNP. At the regional, district and VDC level, 10, 24 and 76 interviews were conducted respectively with the government stakeholders of multiple sectors, representatives of the coordination committees and *Suaahara* representatives. The VDC level participants also included planning and governance body representatives (*Annex 2*). 882 documents (5 national, 38 regional, 121 district, and 718 VDC level) were selected based on their relevance to the study; this included documents relating to *Suaahara*, nutrition, budget allocation, multi-sector meetings, joint monitoring and coordination, WASH activities, and so on (*Annex 4*).

Ethical approval for this study was taken from the Nepal Health Research Council (NHRC). Written informed consent explaining the purpose of the study and answering any questions was taken from each participant prior to the start of IDIs. Consent was also taken for use of recorders, for taking pictures, and for document collection. Data confidentiality was ensured during data collection, management, and analysis. The cleaned data was anonymized by substituting identifiers with codes, using a Master Code list (shared only with the Health Research and Social Development Forum (HERD) core research team). The recordings, transcripts, and documents are safely stored.

2.2 Study Team

Suaahara contracted HERD to carry out the PEGS study. HERD's study team will be referred to as the HERD core team. For the PEGS study, the Principal Investigator (PI) was Dr. Kenda Cunningham, an independent consultant hired by Suaahara and the Co-Principal Investigator (Co-PI) was Ms. Akriti Singh from Suaahara; they will be referred to as the Suaahara team. Ms. Femila Sapkota from Suaahara was later hired and became a part of the Suaahara team (Annex 1).

HERD initially selected a total of 24 field researchers for data collection based on prior work experience with HERD or through intensive interviews by the HERD core team (*Annex 5*). However, 4 researchers dropped out during training and only 20 collected data. Almost all researchers had completed a Bachelor's degree, mostly in public health. The majority of researchers were experienced in qualitative data collection and the researchers' diversity in languages, experience, age, and home districts was important for this multi-district study.

The 20 field researchers were trained for 7 days on qualitative research techniques, research ethics, data quality measures, and the *Suaahara* process evaluation and PEGS study. Similarly, they were also oriented on the structure and functioning of planning and governance bodies at different levels. The researchers were thoroughly trained on the methods and the specific research tools. Training approaches included formal theory sessions followed by question and answer sessions, mock interview sessions followed by reflection and feedback, note-taking and transcribing practice, field trial, and so on. To ensure effective learning, an interactive and informal environment was maintained. All participants were encouraged to provide anonymous feedback at the end of each day, which was reviewed and used to improve the training.

A field trial in Nuwakot was part of the training for the researchers; the HERD core team and the *Suaahara* team went. The researchers were divided into 3 teams: 1 team conducted district level interviews while the other 2 teams practiced VDC level interviews in 2 different VDCs. Learning from the field trial were discussed in detail, researchers were given feedback, and the tools were modified.

The 20 field researchers were divided into 3 district teams. One researcher per team was selected as the District Coordinator (DC) based on leadership ability. The DCs' were responsible for coordination in the study sites and with the HERD office, maintain team discipline, and ensure quality. They were required to check the data collected and were held accountable for its quality. The core team instructed and guided the DCs on their additional responsibilities.

After completion of district and VDC level interviews, 5 researchers were selected, based on their performances and availability, for regional level interviews. Out of them, 3 were selected

for national level interviews based on the same criteria. For the national level interviews, the 3 researchers received 2 rounds of training from the HERD team, orienting them on the national level tools and guiding them on conducting interviews with participants at the national level.

2.3 Data Collection

The core team members and the field researchers interviewed participants at all 4 levels. Initially, the field researchers were divided into 3 district teams for district and VDC level data collection, which took place from mid-February to mid-March. A core team member accompanied each of the 3 teams. Each team first completed district level data collection, followed by VDC level. However, in Sindhupalchowk and Darchula, because of unavailability of participants, researchers had to complete a few district level interviews after completion of VDC level interviews. For the VDC, district, and regional level interviews, researchers transcribed the data immediately after the interview. Given time constraints, field researchers also transcribed the interviews conducted by the core research team members.

After this, selected researchers from the Darchula team moved to Doti and selected researchers from Rupandehi and Sindhupalchowk moved to Pokhara for regional level data collection. A member of the core research team also left Kathmandu for Doti and Pokhara for data collection. Regional level data collection was done in March. At the regional level, positions were vacant and therefore unavailability of participants was a major issue.

Finally, 3 selected researchers and core team members conducted the national level interviews from April to August. Participants' time constraints, heightened by the loss of time and attention after the major earthquakes in April and May, were a major challenge. Almost all national level interviews were directly translated from the recording, to avoid further delays.

Field researchers and core team members were responsible for collecting relevant documents from their participants. Photocopying for document collection proved challenging because of the unavailability of photocopy machines, the length of documents to be copied, load shedding of electricity, hesitancy by participants, and so on. Thus, researchers had to make multiple visits for documents. Some of these challenges were overcome by using smartphones to take pictures of documents instead of photocopies reassuring hesitant participants regarding anonymity, and showing official letters for the study.

2.4 Data Management and Translation

The transcripts, recordings, and collected documents were submitted to HERD upon arrival from the field to Kathmandu. The data were received, checked for completeness, and stored safely until translations began.

The core team selected 15 translators. Many of them had worked with HERD in prior studies while the rest were hired on the basis of a trial that tested them on their language skills, accuracy, and speed (*Annex 6*). The core team oriented the selected translators on *Suaahara* and the PEGS study, as well as translation skills. The translators then translated all data from Nepali into English from April 8 to August 21, 2015.⁴

The translation supervisor and core team closely monitored the translators and held discussions with them about translation issues and ways to solve them. The translation supervisor compared the translated transcript with the original Nepali transcript from time to time and provided feedback to ensure quality, accuracy and consistency. To ensure quality, 1 transcript of each of the 15 translators was checked thoroughly by a core team member and then each was given at least one round of individual feedback based on his/her limitations.

Once the translation supervisor was satisfied with a translated transcript, the core team did a final check and cleaning of the transcripts, ensuring clarity and legibility. The original transcripts were referred to, when necessary. After translations, the hard copy of the data and the recordings were stored safely. A log was maintained of all the documents (electronic as well as photocopies) submitted to HERD and stored safely until analysis began.

2.5 Data Coding and Analysis

Analysis was done by reading the transcripts at least twice, developing codes, coding the data, and identifying themes. The core research team came up with preliminary codes after reading the transcripts, and in collaboration with the *Suaahara* team, updated the code list. Ms. Rekha Khatri and Ms. Shraddha Manandhar from the core research team coded the transcripts using Atlas.ti, a qualitative data management software program. Ms. Khatri and Ms. Manandhar coded each of the first 5 transcripts, held a discussion to ensure a common understanding of the codes, and then updated the code list. Then, they split the dataset to singularly code the remaining transcripts; both coded data of all levels. They, along with Ms. Anju Bhatt, used the same code list to code the collected documents. Data coding progressed in an iterative manner, with regular discussions on the codes, to maintain consistency among coders.

After coding, outputs were generated from Atlas.ti and printed. All 3 core team members then read through the coded extracts from the transcripts as well as the collected documents and looked for inter-linkages and generated themes based on which this report has been developed.

⁴ The translation process was halted for over a month during April-May because of the earthquake.

CHAPTER 3: MSNP AND MULTI-SECTORAL BODIES: UNDERSTANDING AND IMPLEMENTATION

3.1 Awareness of the MSNP

All participants were asked about the MSNP. Most participants at the national and regional levels had heard about the MSNP but did not know the details. They had a general idea that the NPC had designed it and that it specifies the involvement of different sectors such as agriculture, livestock, water and sanitation, and so on rather than just health for nutrition. Few participants, specifically *Suaahara* staff at both national and regional level, and representatives of MoFALD, Child Health Division (CHD), and NPC linked the NAGA 2009 which recommended action by different sectors to address malnutrition and creation of the MSNP.

Many evidences have shown that nutrition cannot be addressed from health sector alone and so different sectors have to work in nutrition. All the sectors have to work on nutrition stepping up on the MSNP. All of us had done work in the past as well. Agriculture had worked; WASH had worked...agriculture had worked on the basis of food production and food consumption but the thinking is that all of them should work from the nutrition perspective and all of them should work together.

-CHD Representative, Kathmandu

At the district level as well, most participants mentioned that the nutritional status of women and children cannot be improved only by the health sector and therefore coordination among various sectors is required. The *Suaahara* district representatives were highly informed about the MSNP including its NPC leadership and structures at national and sub-national levels.

The MSNP was made by the NPC and introduced by Dr. Baburam Bhattarai in 2011. A structure has been formulated to promote nutrition from national, regional, district to VDC level; National level Nutrition and Food Security Steering Committee [NNFSSC], RNFSSC, Multi-sectoral Nutrition and Food Security Steering Committee at district level. We are working under that structure. It has multi-sectoral personnel, multi-sectoral offices...The plan mentions that it is difficult to improve the status of nutrition plan through only one sector, so different sectors have vital role to play in the nutrition field. Suaahara has also designed its activities according to the MSNP.

-Suaahara representative, Darchula

A few district government line agency representatives mentioned that the MSNP is a national plan and most noted that different sectors - agriculture, health, livestock, water and sanitation, women development, education, and District Development Committee (DDC) - come together to plan how to address poor nutritional status. Very few participants in Rupandehi and Sindhupalchowk said that they are not aware of the plan including one who said that *Suaahara* had given the document but he hasn't read it yet. Some participants mentioned that the MSNP is

for improvement in the nutritional status of 1000 day mothers and children and coordination with *Suaahara*, implying that they understand the MSNP and *Suaahara* as synonyms.

Very few VDC-level participants in both the IG and non-IG VDCs knew about the MSNP. In the IG VDCs, a few participants such as the *Suaahara* FS, a social mobiliser (SM), and a WCF (Ward Citizen Forum) member in Darchula shared that this is a national plan formulated by the government with the realization that coordination and support from different sectors is required for addressing malnutrition. In the non-IG VDCs, some participants such as VDC secretaries in Rupandehi and Sindhupalchowk mentioned that this plan is a national program launched in coordination of 7 different ministries to reduce malnourishment. The *Suaahara* FSs in both Rupandehi and Sindhupalchowk mentioned that it is a mechanism for different sectors and not just health to address nutrition problems. A SM in Rupandehi mentioned that the MSNP targets golden 1000 day mothers while a VDC secretary in Darchula shared that the MSNP provides information about nutrition focusing on pregnant women and distributes eggs free of cost. Most Citizen Awareness Center (CAC) and WCF members and some SMs in both IG and non-IG VDCs shared that they hadn't heard about the MSNP.

3.2 Government Actors and their Roles in Nutrition

Government agencies in health, agriculture, livestock, education, women development, urban development, and local development are the key MSNP actors. The participants representing these agencies at all levels explained their sectoral activities and their contributions to the nutrition sector. The national and regional level participants shared that their major role is to make plans and provide supervision and support to implementation processes carried out at the district and VDC levels. Most districts and VDC as well as a few regional-level participants from different sectors said that they include sessions on nutrition during their trainings.

We have seen that during the program of livestock and agriculture, they include a 1-1.5 hours "session" on "nutrition." In this way, they include the nutritional agenda in their own program which is quite functional at the district level.

-Suaahara representative, Far Western Region

Almost all agriculture and livestock representatives shared that they indirectly contribute to nutrition. District Agriculture Development Office (DADO) participants in all districts shared that they have nutrition related programs such as fruit production, vegetable production, fish farming, mushroom farming, bee farming, and cereal production; they distribute seeds to farmers and provide trainings. Similarly, livestock office representatives said that their major responsibility is to increase production of milk, eggs and meat; they also form groups to raise awareness about the importance of these and provide training on ways to increase production.

The agriculture and livestock participants at the national level and in the FWDR also mentioned the Agriculture and Food Security Project (AFSP) which is being implemented in 7 districts of the FWDR jointly by the agriculture, livestock, and health sectors for the improvement of nutrition among 1000 day mothers and their children. The RAD representative said that this project is similar to *Suaahara* but avoids duplication in implementation by focusing its behavior communication and change activities on agriculture and food security.

In the health sector, almost all the participants mentioned programs for growth monitoring, Vitamin A and de-worming tablets distribution, antenatal care (ANC), postnatal care (PNC), promotion of exclusive breastfeeding, and counseling related to eating nutritious foods.

Similarly, most WASH sector participants mentioned that they indirectly contribute to nutrition by promoting sanitation working towards declaration of Open Defecation Free (ODF) communities.

3.3 Implementation and Challenges of the MSNP

A few participants representing NPC, MoFALD, and CHD at the national level and a *Suaahara* representative at the regional level mentioned that the government has only piloted the MSNP in 6 districts thus far and has plans to scale up to all districts in the near future. In the study intervention sites, none of which are MSNP pilot districts, most participants at the regional and district level and a few at the VDC level had heard of the MSNP. The VDC level participants knew about the Nutrition and Food Security Steering Committee (NFSSC), despite not having heard of the plan.

Various participants at the national, regional and district levels mentioned that the major challenge to MSNP implementation is internalization and ownership of the plan. A former NPC member also noted the problem of "everybody's responsibility is nobody's responsibility" and added that all the ministries should actively and seriously own the MSNP. Some other participants such as NPC members and representatives of the District Health Office (DHO) and District Water, sanitation and Supply Office (DWSSO) in Sindhupalchowk and Rupandehi mentioned inadequate and weak coordination among sectors because non-health sectors still do not own nutrition.

I have to say that it has not been "internalized" fully even now. At the district, there is the concept that it only has to conduct the program that comes from the NPC. So, we should be able to "integrate" it in the regular program of every sector. If we consider the "weight", a single district conducts the program worth Rs. 4-5 crores. We should consider the weight of the nutrition program. If we can tell them to allocate certain percent of that amount for the integrated nutrition program, they will feel more "ownership" for that program.

-Representative, DoA

A few non-government national-level participants mentioned other challenges for effective implementation of the MSNP - capacity gaps among decision makers at the national and local levels; few people with a nutrition background and insufficient training at the national level; and insufficient people with both technical and managerial skills willing to work at district and VDC level. A resource gap has also been identified by national level participants who said that without government prioritization and resource allocation, the MSNP cannot be scaled up or maintained. The CHD representative in particular mentioned that there has to be a policy above the plan to facilitate better adoption of the multi-sector approach to nutrition.

A few *Suaahara* representatives (but none at the local level) mentioned a lack of grass roots level structures for some sectors as an MSNP implementation challenge. Specifically, they noted that Agriculture Service Center (ASC) and Livestock Service Center (LSC) have to look after many VDCs, which is a challenge especially in difficult geographical conditions.

Most *Suaahara* representatives at the regional and district levels and a few government representatives at the district level feel that since *Suaahara* has been advocating for implementation of the MSNP, there is a lack of ownership from the government line agencies as they equate the MSNP with *Suaahara*.

The DDC hasn't been able to internalize MSNP. We formed the committee with Suaahara's initiation. We discussed with the stakeholder agencies and others about what we can do in this sector. We have had meetings for 4-5 times but haven't been able to adopt it in the form of a plan because there is no "periodic plan" in our district.

-DDC Representative, Darchula

We have not been able to make them [government] feel at the central level that the districts supported by Suaahara also belong to the government [apart from the 6 piloted districts]; they should also be counted as government's and included in the plan. The multi sector nutrition committees have been formulated within the MSNP. We supported in the formation and therefore the government feels that they are Suaahara's committee. Since they are thought to be Suaahara's committees, the meetings take place only if Suaahara requests them. In the district, it seems that MSNP is Suaahara's responsibility.

-Suaahara representative, Western Region

3.4 Nutrition and Food Security Steering Committee (NFSSC)

Based on the MSNP, NFSSC was formed at all levels. Only some participants at the national level mentioned the High level Nutrition and Food Security Steering Committee (HLNFSSC) and the National Nutrition and Food Security Steering Committee (NNFSSC). NPC representatives stated that the committee reviews on-going MSNP activities and provides policy directions. One participant related to NPC mentioned that the HLNFSSC meetings are held 2-4 times a year while another participant said the committee only meets once a year owing to busy time of the

chairperson and the members and added that members don't seem to completely understand the MSNP or exude ownership of the plan in their presentations.

The regional level committees were found to be non-functional and not even all committee members mentioned in the MSNP were aware of the committee. Few participants in the FWDR mentioned that the committee had only one meeting.

At the district level, the participants reported that DNFSSC had been formed over a year ago but had had very few meetings. Most participants except agriculture and livestock representatives in Sindhupalchowk were aware of the committees. Some members in all districts mentioned that the committee is not very active and had irregular meetings depending on the members' availability but some participants reported that the committee conducts quarterly meeting in Darchula, six monthly in Sindhupalchowk, and bi-monthly in Rupandehi.

In both IG and non-IG VDCs in all districts, there were variations in the frequency of the meetings as some said the meeting is held monthly while others said that it is held once in six months. The VNFSSC minutes showed that the IG VDCs in Rupandehi and Darchula had fewer meetings than non-IG VDCs, but in Sindhupalchowk, the opposite was true.

Most committee members in these districts mentioned that they discuss nutrition and nutrition-related topics, including the nutritional needs of women and children, healthy eating, hand washing, breastfeeding, and so on. Only a few of them were specific about the committee's discussions. In Rupandehi and Sindhupalchowk, the DNFSSC members said that they discuss nutritional activities and their progress and the latter added that they also request its VDC level committees to allocate block grant for nutrition. Similarly, a livestock representative in Rupandehi also added that they discuss about line agencies' roles and how they can contribute to take nutritional programs forward.

The meeting of these committees is held quarterly...we discuss about the work done in the past four months...what went well, what work needs to be done, why they were not done...we also do "planning" for future programs. Mainly, these two things are discussed in the meeting.

-District Agriculture Office (DAO) Representative, Darchula

When I participated in the meeting once, we discussed about nutritional status, national data... Another thing which was discussed was the sectors which were involved in improvement of nutritional status, monitoring and supervision and gap between them.

-DNFSSC member, Rupandehi

Most participants such as the VDC secretary, VNFSSC members, *Suaahara* FS, SM, and CAC members in both IG and non-IG VDCs said that the committee discusses nutrition, distribution of eggs, seeds, and chicken and raises awareness on nutrition for 1000 day mothers and children. They mentioned meeting discussions about four food groups, exclusive breastfeeding,

sanitation and health, nutritional activities, and allocating budget for nutrition. Most participants in both types of VDCs have shared about allocation of budget for 1000 days mothers and children through the VNFSSCs. A VNFSSC member in an IG VDC in Sindhupalchowk said that they discussed about keeping a weighing machine in every ward and also providing a cash incentive to encourage women to go to facilities for check-ups and delivery. The DNFSSC and VNFSSC meeting minutes also showed discussions on nutrition, review and monitoring of *Suaahara* activities and plans, budget allocation for nutrition related programs, and so on. Additionally, VNFSSC minutes from both IG and non-IG governance VDCs mentioned formation of monitoring committees and chicken and seed distribution to 1000 day mothers. In the IG VDCs, distribution of Rs. 1500 to Disadvantaged Group (DAG) households to make hen coops was also observed.

There are discussions about the VNFSSC budgeting and about the activities that the VDC can do to prevent people including the 1000 day mothers and their children from malnutrition. We also discuss on the information provided by Suaahara. So, the discussion especially takes place about budgeting, the work that the VDC can do and how it can allocate the budget.

-SM, Rupandehi

Most participants mentioned 2 main factors that facilitated the formation of the NFSSC in their respective areas: (i) the MSNP and (ii) the presence of *Suaahara*. They said that the MSNP's guideline is explanatory of who to include as members and therefore forming the committee was easy. The *Suaahara* representative in Sindhupalchowk shared that the working procedure of the MSNP has supported in formation of the committee in the district. The district stakeholders in Darchula attributed the formation of the committee to *Suaahara* program.

Well, Suaahara took the "initiation" while establishing the mechanism. It requested the DDC and the DDC sent the letters [to other stakeholders]. Then, there was a general orientation program on what the committee is about. Suaahara also mentioned about holding regular meetings. The DDC also conducts these types of coordinating meetings. Since Suaahara has adopted the sector wide approach in nutrition, it has been easy and the stakeholder offices also participated in it willingly.

-DDC representative, Darchula

Similarly, a *Suaahara* representative in Sindhupalchowk mentioned about *Suaahara* organizing the meeting to form the committee and providing orientation on the working procedure of the document. At the VDC level, most participants who were aware of the NFSSC stated that its formation was easier because *Suaahara* had been working in the nutrition sector for quite some time and thus, set the context for it. This was frequently shared in both Darchula VDCs while the participants of Rupandehi and Sindhupalchowk VDCs didn't mention specific facilitators but did mention that there were no obstacles in formation of the committee.

Suaahara program was implemented at that time with nutrition related activities. It was contextual for the formation of nutrition committee.

-Health Facility Operation and Management Committee (HFOMC) member, non-IG VDC, Darchula

3.5 Water, Sanitation and Hygiene Coordination Committees (WASH-CC)

The WASH-CCs were found to be actively functioning at the regional, district and VDC levels. Almost all participants were aware of the committee and noted that the committees are focusing on the ODF campaign. At regional levels, the participants in FWDR and WDR reported meeting monthly and on an as needed basis respectively. The members of the regional committees mentioned that the committees function based on the National Sanitation Master Plan and monitors and supervises the district level WASH committees.

We conduct meeting and discuss, especially before "declaring ODF". LDO [Local Development Officer] and Chief of drinking water from related district claim that they are ready to declare ODF in the district. There are various discussions such as number of toilets constructed, situation of hygiene and sanitation, whether the "minimum requirements" for declaring ODF is fulfilled or not. They "present" these things and a "sub-committee" is formed by Regional Water, sanitation and Hygiene (R-WASH) which goes to the respective places, "verifies" and also gives a "report" on whether the district can be declared ODF and then only R-WASH- CC gives the permission to "declare" ODF.

-Suaahara Representative, WDR

At the district level, Darchula and Rupandehi participants said that the committee conducts monthly meetings whereas in Sindhupalchowk, participants reported different meeting frequencies. At the VDC level in Darchula most participants- WCF members, *Suaahara* FS, SMs, and CAC coordinator said that the Village WASH Coordination Committee (V-WASH-CC) held meetings twice a month until the VDC was declared ODF, after which the committee meets once in 3 months. Committee members in Rupandehi and Sindhupalchowk reported monthly and bimonthly meetings respectively. At all levels, participants mentioned that *Suaahara* is a committee member.

Almost all participants reported that the committee focuses and monitors on strategies, progress, difficulties, and challenges of the ODF campaign. Further, the members also stated that they discuss regular updates on the numbers of toilets constructed, number of households that are yet to construct toilets and their issues in doing so, and the measures to encourage or obligate people to make toilets. The VDC level participants mentioned monitoring visits for construction and use of toilets. A few V-WASH-CC members shared about supporting households to construct toilets; Rs. 3000 to households in Darchula and pans and pipes in Sindhupalchowk. Some VDC secretaries and V-WASH-CC members in Sindhupalchowk and Rupandehi shared that the VDC office stopped services to people who didn't construct toilets at

their homes. In Rupandehi, one of them mentioned that they even took police help to force people to construct toilets.

The focus of WASH is to declare the entire district ODF. Our main concern is on how to make the VDCs, municipalities and sub metropolis ODF. Our agendas in the meetings are the progresses that we have done. Among the different "sectors", we do the "presentation" at first. After that, the other sectors also do the presentation on their "leading" VDCs. During that, there is review of what progress has there been, what our "status" in the current meeting is as compared to the previous one and what the use of toilet is like in the VDCs and municipalities. The second thing is the "target" set by our work plan. We have a target about the time by which the specific VDCs would be declared ODF. There are discussions about what obstacles there are to fulfill that target, where the obstacles lies and what role should be played at the level of District WASH Coordination Committee (D-WASH-CC) to overcome those obstacles. We make decisions whether we have to go for monitoring in the "next" meeting or we have to convince the people or whether we have to "support" in the insufficient things. Then we proceed towards implementing those decisions.

-DWSSO representative, Rupandehi

The members of V-WASH went to every household of every tole. They monitored completely before the declaration of ODF and made sure that the toilets were being used. Only then, they declared our VDC as ODF.

-CAC Coordinator, Darchula

In addition to ODF declaration, the members reported that the committees also focus on promoting safe and pure drinking water and overall cleanliness of the house. At Darchula, the V-WASH-CC member, *Suaahara* FS, and CAC coordinators stated that they promote places for washing utensils and drying them for hygiene purpose. Most committee members at the VDC level said that their focus after ODF declaration is to promote complete sanitation.

The minutes at all levels show that the meetings discuss on collection of sanitation related data, budget allocation for toilet construction, formation of monitoring committees, declaration of ODF, and preparation of strategic plans for water and sanitation, and so on.

3.6 Multi-sectoral Coordination and its Challenges

When asked about coordination among sectors, most participants representing government line agencies at district and VDC levels mentioned the NFSSCs, but did not specifically mention intersectoral coordination of activities among agencies except in Darchula where they reported the AFSP and in Rupandehi, where the representative of the District Livestock Office (DLSO) mentioned that they coordinate with the DADO and the Women Development Office (WDO).

The offices which work in coordination are WDO, DADO and DLSO. These offices are very "interrelated" on the basis of their own program. They (DADO and DLSO) take programs in the places where WDO has formed groups. There are programs like distribution of grass seeds to those committees by Agriculture Development Officer (ADO). We also support by distributing medicines in the places where the trainings of goat rearing has been given. We work together in that way.

-DLSO Representative, Rupandehi

In most instances, district and VDC level participants mentioned that they have coordination meetings, referring to the NFSSC meetings. Joint implementation of activities wasn't mentioned, but participants at various levels mentioned joint monitoring and supervision activities. At WDR, a *Suaahara* staff mentioned that there is a practice of joint monitoring of the nutrition program from regional health, agriculture, livestock, and drinking water offices. At the district and VDC levels, very few participants mentioned specifically that they jointly monitor programs.

A date for monitoring particular VDC is already discussed in the meeting of D-WASH-CC and a "joint monitoring team" comprising members of DDC, DPHO, Education Office and our division office is formed. This team goes in the community for monitoring.

-DWSSO representative, Rupandehi

All participants mentioned challenges to multi-sectoral coordination, especially for the NFSSCs. The national level NPC participants and others said that territoriality was an issue initially, as the health sector was wary of other sectors being involved in nutrition programs. Another participant mentioned that there are multiple forums related to nutrition and hence, duplication at many levels. In addition, most participants noted the frequent transfer of staff, workload of government staff, and lack of elected representatives at the district and VDC levels as challenges for multi-sector coordination.

There was challenge to involve all the multi-sector organizations. Before the MSNP, only DPHO was involved in the programs of health and nutrition. There were issues from DPHO regarding involvement of other sectors but there are no such issues now. There were issues like how the "non-health" people can do the activities that are done by "health." There were issues like how they are capable but it has been sorted now.

-NTAG, representative, Kathmandu

DDC is supposed to take the initiation (to implement MSNP) but it is not able to do so. This is because there are not elected representatives and we have to work according to the suggestion and cooperation from the all-party political mechanism. It is a bit difficult to work with them because there are representatives of the parties and not specific people who know about the program and past decisions. Different individuals come in different meetings due to which there are obstacles in taking targeted decisions and reaching the goal.

-DDC representative, Darchula

At the regional level, most participants mentioned difficulties in coordination because of unfulfilled positions in government agencies. For nutrition related work, the regional participants, especially *Suaahara* representatives mentioned that there is lack of ownership among government stakeholders as they think that the committee is formed for *Suaahara* or rely on *Suaahara* staff to call meetings.

Well, we said that the committee has to be formulated. Then, we went there [region] and formulated it. So, it is thought that the committee has been formulated for Suaahara itself. For example, if Suaahara calls for the "quarterly meeting", then it is held and we put forward our "agendas." There are other organizations too which work in nutrition. They haven't "utilized" that forum.

-Suaahara representative, FWDR

Furthermore, some participants also mentioned their workload preventing meeting attendance and joint activities. *Suaahara* representatives in all districts stated the business of government officials in their regular work preventing sufficient prioritization of coordination. At the VDC level, most VDC secretaries mentioned having to coordinate various activities and committees. Similarly, most ASC and LSC representatives said that 1 person has to look after many VDCs and they can't participate in other activities.

3.7 Sugahara's role in Multi-sectoral Coordination

Most participants acknowledged and appreciated *Suaahara*'s role in bringing different sectors together for nutrition and WASH activities. The government participants, especially those from the national level shared that there has been improved coordination because of *Suaahara*; this was echoed by district and VDC-level participants as well. Some participants such as representatives of NPC, MoFALD, and *Suaahara* partners noted *Suaahara*'s instrumental role in taking the MSNP forward to the community level and its establishment of a very good foundation to take the plan further. A member of the NPC said that *Suaahara* has supported the formation of multi-sectoral committees in the district and in enhancing their capacity.

Suaahara has moved together with various sectors such as the Department of Agriculture (DOA), Department of Livestock Service (DLS), local agencies, all the government agencies and the non-government organizations concerned with nutrition. It has maintained coordination and worked in that way right from the top level at the center to the grass root level at the VDC. There has been improvement in nutrition because Suaahara makes them gather together and presents its issues. It organizes the meetings and they meet each other. We also make commitments from our respective level saying that we would do such and such things in joint way. Suaahara has provided a common ground and is the mediator because of which there is increased coordination.

-DoA Representative, Kathmandu

Suaahara's national level representative also said that they share their experiences of large scale field level MSNP implementation with high level nutrition committees to make them aware of ground realities; this, in turn, is appreciated by the NPC and stakeholders. District-level participants report to have met frequently, to know about one another's activities, and to avoid duplication of efforts in their planning because of *Suaahara*.

After the establishment of this committee, different sectors have been included. That is why everything is discussed in one place. The work done by each other's sectors is discussed and shared

with each other. The other sectors know what they are doing and what work should be done. This helps in making good relations with each other. Suaahara has played a great role in this. It has helped in organizing meetings, discussions, and so on.

-DNFSSC member, Rupandehi

VDC level participants have also said that *Suaahara* has formed multi-sectoral committees, brought different sectors together to promote ideal nutrition and WASH behaviours, and provided lunch or snacks for meetings which has helped facilitate more regular meetings.

We had not been able to invite and coordinate with agriculture, education, VDC, other agencies working in sanitation and the people from the political parties at the same. Suaahara gathered all of them at the same place. Suaahara has played a coordinating role in linking nutrition with education, health, drinking water, agriculture, veterinary and bringing them all together to take the program forward.

-HFOMC, Rupandehi

3.8 Suggestions for Effective Coordination

Most participants noted frequent and regular meetings between different sectors are required for effective coordination among them. A few national level participants said that the MSNP architecture, i.e. the NFSSC at all levels should be further strengthened and feedback should be provided to the NPC through its working groups. A MoFALD representative mentioned the need of an MSNP driving committee formed in each ministry for increased ownership. A DoA representative said that the focus should be on indicators and its achievement and joint monitoring should be emphasized for better multi-sector coordination. A few participants, such as the DDC representative in Sindhupalchowk and the DLSO representative in Darchula, mentioned that there should be clear roles and responsibilities and work plans between the agencies.

... Feedback could be taken by conducting a joint gathering of different individual, groups, agencies and non-governmental agencies working in nutrition sector. This type of gathering could be done once or twice a year. There should be clear direction about what is happening and what will happen. Our objectives should be "clear cut". Then we should make a whole "action plan" with a "time table" about who will conduct the program, how will it be conducted and whether the programs will be done individually or jointly. The programs will be "effective" if we move forward like this. People do not trust Suaahara or District Livestock office if we go separately and instruct them.

-DLSO representative, Darchula

Few participants from line agencies and *Suaahara* staff also mentioned that exposure visits also help in effective coordination. A DNFSSC member in Sindhupalchowk said that a 2-3 day orientation program is important to clarify roles of all the MSNP members and district agencies, rather than *Suaahara*, should lead. A DWSSO representative in Rupandehi mentioned the need for resource for effective committee functioning.

CHAPTER 4: GOVERNANCE STRUCTURES AND PLANNING PROCESSES

4.1 Citizen Awareness Centre (CAC)

All the CACs in Darchula and Rupandehi were reported to be functional and to hold meetings regularly. Both CACs in Sindhupalchowk existed, but were reported to be less active. The majority of CAC participants in all 3 districts reported learning and applying knowledge about different issues such as sanitation, nutrition, agriculture, and so on. The CACs in IG VDCs in the 3 districts were clearly functioning better than the CACs in the non IG VDCs in terms of their knowledge and awareness about CAC and their role in the VDC planning process.

In Darchula, although both CACs were conducting weekly meetings and functioning actively, the CAC participants from the IG VDCs were more enthusiastic and knew more about CAC members, functioning, and their role in VDC planning process. In a CAC meeting of an IG VDC, distribution of stationary items including copy, pen and books, to conduct discussion on *Bhanchhin Aama* (*BA*) program was documented.

In the IG VDC in Rupandehi, CAC participants reported conducting weekly meetings and that the members received training, such as on mushroom farming, from the VDC. The CAC coordinator reported that he learned new farming and animal husbandry skills from an observation visit. A CAC member reported CAC provision of seeds to members at subsidized rates and that their center had been receiving lunch allowance from the DDC for 2 years. In the non-IG VDC in Rupandehi, CAC participants reported that they stopped monthly meetings when the SM moved to another ward. However, 48 meeting minutes were collected from the non-IG VDC in Rupandehi, which evidenced that the CAC was previously functioning actively.⁵

There are 30 members and 4-5 main people [major members] in CAC. I had no knowledge before involving in the CAC that I should talk with other people like I am talking to you now. I used to run towards home before when I saw any new person. I did not know how to sign my name before. I learned to sign my name after joining CAC. Before involving in CAC, 30 people used their thumb print but now many of them sign their name. We collect 20 rupees per person so that it can be useful in emergency. In difficulties; we can take money from this fund.

-CAC member, IG VDC, Rupandehi

Although both CACs were reported inactive in Sindhupalchowk, the CAC in the IG VDC was reportedly more active. The 2 CAC participants interviewed in the IG VDC in Sindhupalchowk reported that they were the only 2 members and that they conducted sessions on sanitation and

⁵It can be assumed that these meetings were conducted before the SM left for another ward as the minute of the last meeting collected was dated approximately a year before the duration of data collection.

nutrition by gathering people in the village, at least twice a month. In the non-IG VDC, a CAC member reported that they conducted 2-3 meetings initially and no meetings since. Participants from both CACs in Sindhupalchowk reported that they had not prioritized needs, submitted/demanded anything to the VDC, or participated in the VDC council.

Most participants across both IG and non-IG VDCs mentioned discussing nutrition, toilet construction, and ODF campaigns. More participants from the IG VDCs mentioned discussing *Suaahara* and *BA* compared to the non-IG VDCs. The CAC meeting minutes from all 3 IG VDCs revealed that discussions on the importance of nutrition during pregnancy, support to mother and child by mother-in-laws, techniques of complementary feeding after the child is 6 months, *harek baar khana chaar, BA*, and so on had taken place. The participants from all VDCs also frequently mentioned that they discussed the process of acquiring citizenship, the facilities they receive from the VDC, skill development and income generating issues, and the problems in their village including drinking water, gender issues, their needs, and so on. A CAC meeting minute in an IG VDC in Darchula reflected discussion on household WASH practices.

P: Mostly on malnutrition: how does malnutrition happen in childhood or what kind of food items should a pregnant mother eat, what kind of support and facilities are we receiving from VDCs, what is the importance of citizenship, different things like infrastructure development, how to keep water pure or how can baby and mother be kept content and balanced and importance of mother and baby are discussed.

I: What do you discuss about regarding nutrition?

P: Nutrition now... What nutrition means or what kind of thing or what diet can be called balanced diet or what food items should we eat, what food a pregnant woman should eat, how that helps the baby, and what kind of food eaten by the pregnant woman support the baby in the womb and how; all these things are discussed.

-CAC member, non-IG VDC, Darchula

The CAC meeting minutes collected from the IG VDC in Darchula documented members discussing and committing to listen to *BA*, even scheduling the meeting from 6-7 pm on Saturday so that members could listen together and discuss afterwards. Sanitation was a particular focus with members committing to clean houses and public places and discussing water purification techniques. Some CAC participants also reported to discuss gender equality and violence. The CAC meeting minutes of the non-IG VDC in Darchula documented participation of *Suaahara* FS, discussions on nutrition and WASH, and experts from animal services and health facilitating sessions on their respective areas of expertise.

In Rupandehi and Sindhupalchowk, sanitation issues were more frequently mentioned by most participants. The CAC minutes from the IG VDC in Rupandehi documented discussions on management of diarrhoea, the importance of toilets in preventing diarrhoea, vegetable farming,

and so on. The CAC minutes from the non-IG VDC in Rupandehi documented CAC members participating actively in the ODF campaign, such as by participation in ODF awareness rallies, prioritizing materials for toilet construction, blowing whistles and banging utensils if anyone breached the ODF rule, and mobilizing children to do the same. A few minutes also documented discussion relating to *BA*.

Almost all CAC participants from all 3 districts reported prioritizing drinking water, road construction, and skill development activities. In Darchula, participants mentioned that nutrition, the need for stretchers, and programs for women and children were prioritized. In Rupandehi, participants additionally reported gravelling of roads, dam construction to protect from flood damage, and bridge construction as priorities. Other issues reported were off-season vegetables farming, drinking water, sewing, chicken farming, and so on. In Sindhupalchowk, all participants reported that they did not have information about or practice prioritization in the CAC. No significant difference was reported in the IG and non-IG VDCs in terms of priority areas.

Many participants in Darchula and Rupandehi reported that many of their priorities were addressed by the VDC. They felt that their voices were heard.

I: You said earlier that you demanded for the bridge. How did you demand in VDC?

P: During our meetings, we wrote an application and every member present in the meeting signed it. The application is taken to the VDC. VDC sent it to DDC [District Development Committee] and after approval it again came to the VDC.

-CAC member, IG VDC, Rupandehi

In both the VDCs in Sindhupalchowk, all CAC members interviewed said that they did not play any role in the planning process and were not aware of the planning process.

4.2 Ward Citizen Forum (WCF)

WCF members in all 3 districts reported functional WCFs and that they prioritized needs of their respective wards through discussion with its members before proposing priorities to the VDC. There was little variation in what was reported for WCFs in IG VDCs and non-IG VDCs. Most participants mentioned that their WCF had around 25 members including representatives from the differently abled, women, *Dalits*, health mother's group, FCHVs, chiefs of organizations, and so on. The inclusion of DAGs was explicitly mentioned in WCF minutes collected from both IG and non-IG VDCs in Darchula.

The WCFs in both the IG and non-IG VDCs in Darchula and Rupandehi were reported equally active by the participants. The WCFs of both IG and non-IG VDCs in Sindhupalchowk reported irregular meetings; however, the WCF was strongly linked to *Suaahara* in both VDCs.

WCF is a program of Suaahara. So the aim of WCF is to work for children and pregnant women. The aim of this committee is to work following the slogan of Suaahara that is Golden 1000 days mother's future, their health improvement, management of food and nutrition related to children. Instead of working in this way, this committee is in inactive position.

-WCF member, non-IG VDC, Sindhupalchowk

The majority of the participants in all 3 districts noted discussing and prioritizing various ward-level problems including sanitation, lack of drinking water source, and lack of good roads, skill development, and income generation. Many WCF meeting minutes collected from the IG VDCs showed that ODF, toilet construction and monitoring, and sanitation issues were frequently discussed. Many participants across all 3 districts mentioned discussing *BA* and maternal and child nutrition.

There were variations in the priorities among districts but no clear distinction in priorities between IG and non-IG VDCs within districts. In Darchula, construction of water supply taps and construction of an immunization center was prioritized (DR, Darchula). Participants additionally noted construction of a birthing center, skill development trainings, programs for *Dalits*, and fertilizers and seeds for vegetable farming as priorities. A WCF Coordinator mentioned prioritizing construction of a small building for Expanded Program on Immunization (EPI) programs in remote wards. While a WCF member from the non-IG VDC reported prioritizing nutrition, no such prioritization was mentioned from their IG VDC counterparts. In Sindhupalchowk, WCF participants reported prioritizing reconstruction of *Gumbas*⁶, damaged children center, temporary toilets, schools, and sanitation in addition physical infrastructures. Prioritized issues reported frequently by WCF participants in Rupandehi included toilet construction, suspension bridges, skill development trainings, and one unique priority:

We had demanded for agriculture road [krishisadak]. Ward number 3 has a huge area for agriculture. The work of traditional ploughing in rainy season has become scarce. They plough the field with a tractor. The roads are such that the tractors cannot go for farming. They go around "150-200" meters and there is a problem if they get stuck there. If there is agriculture road then at least agriculture can be done till the "last" [end] of the ward. There is access to the farm. So, the WCF has decided and kept it as the first priority through the meeting this time. It has become a very new demand. They have allocated the budget to implement it. Second, our sewing training has also been continued. It is running this year. Two plans have fallen under ward number 3.

-WCF Coordinator, non-IG VDC, Rupandehi

The majority of the participants noted the WCF as the forum responsible for communicating the prioritized needs of the community to the VDC and also the implementing body responsible for carrying out the plans approved by the VDC.

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⁶*Gumba*is a Buddhist monastery.

4.3 Integrated Planning Committee (IPC)

In the IG VDC of Darchula, an IPC member said that the IPC collected opinions of the people and needs of the VDC and wards and prioritized them to make an integrated plan that is comprehensive of all wards, all settlement areas, and all groups.

IPC is formed according to Local Self-Governance Act, 2055. It does the planning of the VDCs or local agencies and of program based on the demand of the community level or the developmental works. It is the program based on the demand of the community level. The VDC secretary is the coordinator. There are members from mother's group, women group and differently abled, Dalits, and so on.

-IPC member, IG VDC, Darchula

In Rupandehi, a member stated that the responsibility of the IPC was to determine how and where to implement a plan and what programs are to be implemented in the VDC. The IPC members stated that VDC needs and demands received from the WCF or elsewhere were prioritized using a participatory method and by categorizing, ranking, and discussing them, before presenting them to the VDC.

Prioritization in IPC is done in agreement. There is an index of prioritization. We write the name of the plan in the index. The plan which gets more priorities and "numbering"...... There are indexes. The Local Resource Mobilization guideline is in either 10th or 11th number. It is of total 50 marks. Those wards and sectors who have already received the plans will get fewer plans. If some community area.... Like, if there is an unreached settlement area.... If the plan of drinking water was given to that community area in the previous year, their index will decrease, if the plan of drinking water is again proposed in this year. The index of another settlement area will increase by 10 numbers who haven't received drinking water since 3 years.

10 % voluntary labor is compulsory according to regulation. If they [WCF] make plans without voluntary labor, their index will decrease. The projects which will give direct profit to Dalits, women, and DAG group will get more points. The projects which can generate employment or include local production of goods will get more "priority".

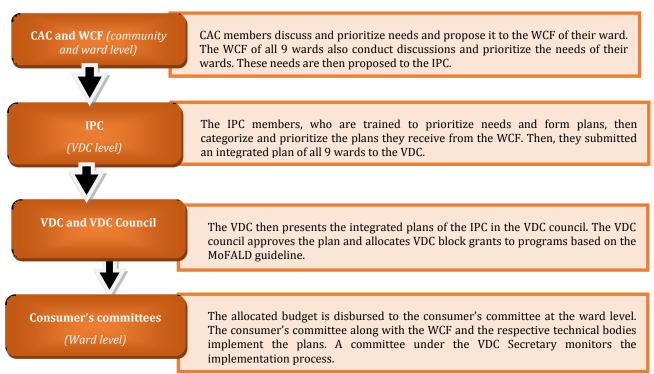
-IPC member, IG VDC, Darchula

The 2 IPC participants from Darchula reported that drinking water, irrigation, and road construction were prioritized in their IPCs. An IPC participant from the non-IG VDC in Rupandehi shared that the IPC members received training on how to prioritize needs. As reported by the IPC participants in both VDCs of Rupandehi, the IPC had prioritized road and sewage construction, blacktopping roads, and skill development trainings for DAGs. In Sindhupalchowk, establishment of a birthing center, awareness regarding institutional delivery, health post building, pregnancy, children, DAGs, orphans, and remote dwellings were reported as priorities from both VDCs.

4.4 VDC Planning Process

The understanding of almost all participants regarding VDC planning was similar, regardless of district or whether or not the VDC was an IG or non-IG VDC. ⁷

Figure 5: VDC planning process



A few participants in the 3 districts (from both IG and non-IG VDCs) mentioned that the demands beyond the budget or capacity of the VDC are proposed to the *Illaka* and district levels for discussion and prioritization.

The Local Self Governance Act and Regulation talks about participatory planning process in the district through the "bottom up approach". The "planning" takes place in 14-15 stages. For the planning process, the WCF has been formed at the VDC level. The DDC conducts the "Pre planning Workshop" and sends the Planning Request Form to the wards through the VDC secretary. The demands for various plans from every sector are placed through those forms after identifying the needs. Then village council has to approve them. After the village council, there is the Illaka level comprising of several VDCs.

-DDC representative, Darchula

4.4.1 VDC Council and Process of Prioritization

Many VDC level participants (both IG and non-IG VDCs) mentioned that the VDC council was attended by prominent members of the VDC including an IPC member, all 9 WCF Coordinators,

⁷ Not all participants mentioned all the steps mentioned in VDC planning process, but none of the participants mentioned any additional steps or any other process altogether for VDC budget allocation

political party representatives, and the VDC Secretary. A Darchula WCF member added that *Suaahara* field staff also attend the council meetings and present their views.

A VDC Secretary in Darchula shared that the plans submitted by the IPC were listed, categorized, and prioritized by everyone present in the council, and then budget would later be allocated.

Besides the plan that comes from WCF, we don't accept any other plan based on applications. In the coming days, if they [higher authority] come from anywhere to "tally" our "register"... Any plan that has not been proposed by the WCF will also not fall within the decision of the village council. We particularly focus on what was approved the year before and on which there is more necessity.

-VDC Secretary, IG VDC, Rupandehi

Many VDC level participants mentioned that the VDC followed MoFALD guidelines for approving plans submitted by the IPC and allocating budget for the same. An IPC member in Darchula explained the budget allocation: 50% for targeted groups out of which 10% goes for women, 10% for children, and 15% for indigenous groups, DAGs and differently abled people. 15% of the budget is also allocated for agriculture. He continued that the remaining 50% budget went for social and economic development programs such as electricity and education sector.

4.4.2 VDC Block Grants Allocation

Many VDC level participants reported the VDC Council approved as many plans proposed by the IPC as the budget allows. Some participants mentioned that the plans that could not be prioritized this year would be passed on to the next year.

Our "total" budget is from the DDC's grant, GoN and the internal income of the VDC. The budget for the administrative purposes is allocated in the administration. If the "matching fund" has to be allocated for salary, allowances, provident fund, stationeries and computers required for operation of VDC and other such capital grants, we allocate that "fund". We take the remaining budget as 100%, 2.5% of which is allocated as "contingency".

-VDC Secretary, IG VDC, Rupandehi

Almost all VDC level participants in all 3 districts reported that the primary areas of VDC budget allocation were developmental activities including construction of roads, drinking water facilities, irrigation canals, and so on.

Many VDC level participants mentioned that a huge proportion of the budget had to be allocated for the vulnerable and marginalized groups. Prioritized programs for women, as reported by many participants, included establishment of a birthing center, skill development and income generation trainings, leadership development for mother's groups, incentives for pregnant women for institutional delivery, improved cooking stoves, and gender based violence prevention and awareness. A VNFSSC member from Darchula recounted that the VDC established a fund of Rs. 7000 yearly for mother's group, which had been increased to Rs. 8000

per year and added that the members could use the money for emergencies at 6% interest. Similarly, budget was also allocated for various programs for children and their education, and scholarships for poor children and orphans. Most VDC level participants from all 3 districts also mentioned of budget being allocated for DAGs like *Dalits* and Muslims for capacity development trainings. Some participants mentioned that the VDC allocated budget for allowances for the differently abled and senior citizens.

Many VDC level participants mentioned that every year the VDC allocated incentives for women who delivered in health facilities. A VNFSSC member from Darchula mentioned that an Auxiliary Nurse Midwife (ANM) had been hired for the birthing center. A health facility in-charge in Rupandehi reported that a certain amount had been allocated for conducting camps and for incentives for FCHVs and added that no other programs had been prioritized in the health sector. However, an IPC member from Rupandehi mentioned that health had received first priority in their VDC. Minutes from a VDC council meeting in Rupandehi showed budget allotment for immunization training.

WASH was prioritized in all 3 districts, as reported by a majority of the VDC level participants. The ODF campaign was prioritized, especially in Darchula and Rupandehi. The VDC council minutes collected from these 2 districts also illustrated budget being allocated for declaration of complete sanitation VDCs, distribution of toilet rings, and/or for construction of toilets. A *Suaahara* FS also added that the VDC had spent the entire development budget on declaring the VDC ODF. A few participants from Darchula and Rupandehi reported that V-WASH-CC received a certain amount from the VDC for ODF monitoring, lunch allowance for meetings, and so on. In addition, many participants mentioned that budget was allocated for various sanitation activities like constructing sewers, building a place for washing and drying utensils in households, and celebrating Water Day.

They [referring to the VDC] have told that there should be "toilet" first in every house. Only then roads and other demands will be looked after. They are focusing on "toilet" from everywhere. Suaahara is also focusing on toilet. The VDC has deprived the households without "toilet" from all its services. I think they will look after other things only when ODF is declared.

-CAC member, non-IG VDC, Rupandehi

Many VDC level participants mentioned that budget was allocated for agriculture and livestock activities including training for farming and cattle rearing. An IPC member from Darchula stated that with the VDC's investment and help from DLSO technicians, training on treatment of animal related diseases and programs on planting of different crops, fruit farming, and so on were conducted. VDC council meeting minutes from Darchula documented budget being allocated for training on seasonal vegetable farming.

4.4.3 Budget Allocation for Nutrition

The majority of VDC level participants said that while nutrition did not receive top priority, some funds were allocated for nutrition promotion activities like distribution of seeds for 1000 day mothers. A few participants mentioned the role of committees like CAC, WCF, and VNFSSC in ensuring that VDC allocated funds for nutrition. Some stated outright that nutrition had become a priority since the advent of *Suaahara*. Almost all VDC level participants mentioned that apart from *Suaahara* and the VDC, no other organization allocated funds for nutrition.

We have realized nutrition is indispensable for human beings. We have understood this. 80% of development takes place from pregnancy to 2 years. Otherwise, the child may be malnourished and his/ her mental development is hampered... the physical growth is impaired. Therefore, we have made full efforts by conducting awareness programs... To declare our VDC fully-nourished VDC, malnutrition-free VDC, we all have decided to take this forward.

-VDC Secretary, non-IG VDC, Sindhupalchowk

According to VDC level participants across all districts, a small amount was allocated for nutrition, often under the category of women and children. Many mentioned that the money was spent on awareness raising programs targeting 1000 day mothers and their children. Some mentioned that the VDC allocated a certain amount for nutrition of *Dalit* children under 2 years of age, where Rs. 500 per month was provided to ensure a nutritious diet.

In Darchula, several participants spoke about different activities conducted with the nutrition budget. A *Suaahara* FS mentioned celebrating egg day keeping the 1000 day mothers in mind. An ASC member stated that while they did not allocate budget separately for nutrition, they conducted trainings on nutritious crops. A VDC secretary shared that they allocated money for buying seeds for 1000 day mothers. VDC council minutes from both IG and non-IG VDCs showed evidence of budget allocation for nutrition.

In Rupandehi, a *Suaahara* FS recounted certain amount being allocated to conduct ward level interactions with pregnant women for awareness on how to utilize the seeds and chicken. A VDC secretary noted that a small amount had been allocated for demonstration of nutritious food preparation targeting 1000 day mothers. In the IG VDC, VDC council minutes showed evidence of budget allocation for child nutrition whereas in the non-IG VDC, budget was allocated for nutrition sensitive activities, such as training on sanitation and immunization.

The proposal related to nutrition doesn't come from any ward. The Rs. 15000 which I mentioned earlier was also allocated from our own side. That amount was surplus when we were calculating. So, I told that we have to allocate this amount for nutrition and complete immunization. Suaahara motivated us for this. They called us and gave us training and provided information using "audio, video" methods. They showed us the condition of malnutrition and good nutrition. So, we decided that we should also "support" in this sector.

A *Suaahara* FS in Sindhupalchowk shared that the VDC had allocated 1,439 USD⁸ for nutrition sensitive and nutrition specific activities including sanitation. The *Suaahara* FS mentioned that mothers who exclusively breastfed children for 6 months and well-nourished babies were honoured with a small amount of cash; the VDC formed child clubs in every ward to help to create complete-sanitation areas. A *Suaahara* FS from Sindhupalchowk shared that the weighing machine and stretchers were purchased keeping in mind the 1000 day mothers. A document collected from the district level showed that 150 USD was allocated in the VDC Council for chick vaccination as part of nutrition activities in the IG VDC. In VDC Council minutes of the non-IG VDC, budget allocation for seed distribution to 1000 day mothers was documented.

4.5 Budget Allocation for Nutrition (District, Regional and National Levels)

At the national level, a participant from the NPC reported that the Ministry of Finance (MoF) had allocated 575 thousand USD for the MSNP activities that fiscal year. He also mentioned that there were projects such as AFSP and golden 1000 days under MoFALD and supported by the World Bank in the central and eastern Terai. He spoke about the mid-day meal program being conducted in various schools and said that activities such as awareness raising, group mobilization and agriculture related activities were being conducted for nutrition. Most national level participants said apart from MoFALD, agriculture and livestock sectors, they did not know whether other non-health sectors allocated budget for nutrition. The DLSO representative in Darchula said that they dealt with food security and nutrition and there were programs such as "zero hunger challenges" being implemented by the DoA and Department of Livestock Services (DoLS). The DoA and DoLS are responsible to ensure nutritious crops and animal source of protein are available for all. He added that AFSP was also being implemented from DLSO.

They [non-health sector] don't allocate it under nutrition heading. When you look at "multi sector plan", you can see that there are two parts in it. One is called "nutrition specific intervention" and it lies under MOHP. "Breastfeeding", "complementary feeding" and "family planning" are some examples. Another is called "nutrition sensitive" which has a "supportive" role. There is "role" of "WASH" in it. For instance, if MoUD says that we will do these things to decrease "diarrhoea prevalence", then that is itself a "nutrition sensitive intervention". Similarly, it is there in MoFALD as well. They have allocated certain amount for "governance" related to "nutrition". MoE has "school feeding" programs.

-Suaahara representative, Kathmandu

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⁸ Nepal Rastra Bank dated (8th October, 2015); 1 US\$=104 Nepali rupees

At the regional level, an RNFSSC said that the Regional Education Office (REO) allocated budget for nutrition for the mid-day meal program for children from grades 1-5 from selected schools. An RHD representative shared that the non-health sectors were not allocating budget directly for nutrition but were conducting awareness, advocacy, sensitization, and orientation programs.

It is not exactly for nutrition but it is done along with the RNFSSC. It will not be mentioned that it is for the "nutrition activity". The programs conducted by district and regional agriculture are not related only to the nutrition. It assists the RNFSSC by "agricultural production" and "crop production". We do it along with the VNFSSC to "ensure" food security. If the food security is ensured, then the nutrition condition will be improved instantly.

-RAD representative, WDR

Some participants mentioned that the DDC allocated budget for nutrition activities. Many said that a lot of VDCs in their districts had started allocating money for nutrition activities. The DAO and the DLSO said that they did not allocate budget for nutrition directly, but that activities, including farming and animal husbandry training were positively affecting nutrition. A few district level participants mentioned the AFSP, which focused on establishing nutritious gardens and targeting mothers. The DLSO representative from Darchula referred to the "food for labor" program where rice and food were provided in exchange for labor and added that the administrative bodies of the government including VDC, municipality, district and MoFALD allocated budget for nutrition programs like Vitamin A, iron supplementation and disease treatment for the improvement of nutritional status of women and children. The DHO representative in Darchula also mentioned that they allocated budget for Vitamin A and Integrated Management of Childhood Illness (IMCI) and added that *Suaahara* allocates budget for celebration of nutrition week at the village level and district level. In contrary to the majority of the participants who said that budget allocation for nutrition was scanty, the DHO representative of Darchula had a different opinion:

Yes, budget is allocated for nutrition in all sectors. In my personal "view", lot of spending has been done in nutrition. "Government, "International Non-Government Organization (INGO), Non-Governmental Organization (NGO)" whoever is it, the money are all provided to the district for the nutrition related programs.

- DHO representative, Darchula

In Rupandehi, a DDC representative said that budget had not been allocated for 1000 day mothers but activities such as managing construction of delivery center buildings, supporting birthing centers, distributing necessary materials for birthing centers, and so on were being done targeting 1000 day mothers. Similarly, in Sindhupalchowk, a DDC representative shared that the DDC separated budget for improved seeds, vegetables and training. The *Suaahara* representative reported that more than 50% of the VDCs had budget for nutrition and that the report of many other VDCs were yet to come. The *Suaahara* representative acknowledged that this was possible because many sectors, such as agriculture and livestock, had raised their voice along with *Suaahara*.

CHAPTER 5: PERCEPTION OF SUAAHARA

5.1 Awareness of Suaahara

Most participants were aware and understood *Suaahara* as an integrated multi-sectoral nutrition program for 1000 day mothers and children. A few national level participants shared that *Suaahara* works in coordination with different sectors- health, agriculture, livestock, WASH, and local government bodies.

Various participants at all levels mentioned that *Suaahara* mainly focuses on Behaviour Change Communication (BCC) related to HTSP, declaring VDCs ODF, kitchen gardens and income generation, and raising awareness about feeding nutritious foods (from at least four food groups) to 1000 day mothers and children. They also mentioned that *Suaahara* distributes seeds and chicks to pregnant women and demonstrates nutritious food preparation at the mothers' group meetings for 1000 day mothers and their families. Similarly, some participants at all levels also considered *Suaahara*'s distribution of vegetable seeds and chicks as strength of *Suaahara*.

Suaahara is a multi-sectoral program as it works not only in health but also in agriculture and livestock. In addition, Suaahara means good diet. Suaahara is such organization which means and teaches about nutrition, provides technical and economic support for the golden 1000 day mothers and children. Now it provides the training to health staffs along with agriculture and livestock sector and it has provided chicken and seeds to the farmers and women related to golden 1000 day mothers.

-HFOMC member, Darchula

Most participants mentioned that they get *Suaahara* related information or updates through meeting and *Suaahara*'s staff in different forums. Few participants such as WDO and DLSO representatives in Darchula shared about being updated about *Suaahara* through *BA*. At the VDC level, many participants shared that they are working with the different *Suaahara* related committees and hold meetings frequently, and so are updated about its activities.

We have got good information from here till now because Suaahara conducts meetings in the wards every month. It makes them aware every month and tells them the programs that have come from up. We have good information about it since it keeps on doing programs.

-V-WASH-CC member, Darchula

District and VDC level participants also mentioned training provided by *Suaahara* and that they gained information on various important issues. They said the training was mostly related to sanitation, nutrition, and vegetable farming. A WCF member and *Suaahara* FS in Rupandehi and

LSC representative in Darchula had also given training on Homestead Food Production (HFP). They further reported that *Suahaara* conducted a one-day training to impart information on which vegetables to plant in different seasons, how to rear hens, the development of the child, importance of hand washing before feeding and before cooking, and so on.

Suaahara has been calling us for 1-2 days in a year and gives us "orientation". I participated twice in two days program. When there was one day program, they gave information about their organization, how it works, how much budget does it have and in how many VDCs it works. They gave presentation on this. I got information on it from them.

-VDC Secretary, non-IG VDC, Rupandehi

5.2 Suaahara Programmatic Activities

Participants from all level mentioned that *Suaahara* has been working with different sectors to improve the nutritional status of 1000 day mothers and children. *Suaahara* conducts various nutrition related activities in the communities including making nutritious *lito* and *jaulo*. A *Suaahara* FS in Rupandehi and HFOMC member in Darchula mentioned that *Suaahara* gives Rs. 800 to FCHVs to buy materials for food demonstrations during health mother's group meeting. Furthermore, a *Suaahara* FS and LSC representative in Darchula explained that *Suaahara* encourages mothers to feed eggs their children about four times in a week (49 eggs in a year), while the mothers should eat 175-300 grams of vegetables and 150-300 grams of fruit every day.

We give education regarding nutrition. The FCHVs have mother's group in every ward. Topics related to nutrition are discussed in the mother's group. Suaahara had given a 5 days training. They had shown posters in the training. They taught us to make jaulo [soft food make from rice and lentils], lito [baby food made from the flour of two part cereals and 2 parts legumes] and porridge of pumpkin. They also told us about the importance of eggs, milk, cauliflower and pumpkin. We prepared and fed it 4 times in the mother's group meeting.

- CAC member, Rupandehi

Most participants at district and VDC level mentioned that *Suaahara* has provided tremendous support to declare VDCs ODF and complete sanitation. Very few participants said that *Suaahara* distributed rings for the construction of toilets to 350 households and monitored toilet construction and its use, which is also mentioned in the minutes. Furthermore, D-WASH-CC meeting minutes in Rupandehi noted *Suaahara's* role in conducting complete sanitation campaigns in selected VDCs. Similarly, D-WASH-CC meeting minutes in all districts reflected *Suaahara's* contribution in conducting the one day workshop on post-ODF and preparing the district WASH strategic plan.

They [Suaahara] go to the villages and gather information about who don't have the toilets and check if their work is being done by the VDC. They give "report" of the people who have already finished making toilets and who have to be given the certificate. They gather the information about this and provide them the certificates.

-VNFSSC member, Rupandehi

In addition, a HFOMC member and a *Suaahara* FS in Rupandehi mentioned that high quality foreign bred chicks and vegetable seeds for 3 seasons were distributed to select DAG households.

No, they didn't call everyone. The five of us held a meeting and brought the data about who is poor and who is in which condition. The people who have land for agriculture were not given. It is given to those people who are poor and cannot do anything. Such discussions happen almost every time in the meetings.

-WCF member, IG VDC, Rupandehi

There were a few participants at national, district and VDC levels, but none at the regional level, who mentioned *BA* radio program. Very few participants at district level, representing agriculture and water and sanitation said that *Suaahara* focuses on messages related to nutrition, drinking water, sanitation, 1000 day mothers and their children, and also behavior change- hand washing with soap and water through the radio program. *Suaahara* partners at the national level noted that the *BA* program should be in many other languages, in addition to the current three, to effectively disseminate messages in all communities.

Everybody is excited to listen to Bhanchhin Aama radio program. Mostly, everybody listens to it. If we listen to it once, we feel like listening to it again and again. It's the same with everyone. More than us, the women feel that way. If something has happened to anyone, they directly know about it from the Bhanchhin Aama radio program.

- SM, Darchula

5.3 Strengths of Suaahara

The majority of participants appreciated *Suaahara's* contributions on nutrition. Some VDC level participants in Sindhupalchowk and Rupandehi and a *Suaahara* FS and SM in Darchula shared that *Suaahara* has not only taught what to do but also taught how to do it. It has taught people that food from at least four food groups should be consumed daily but it has also shown them the way to ensure they have foods from the four food groups available year round. Most participants noted that community people have accepted *harek baar, khaana chaar*.

Suaahara is distributing seeds, animal products like eggs and chicken to the golden 1000 day mothers and children to improve the nutritional status which is very good. Apart from this,

Suaahara is providing public awareness too. It is helping them to become independent rather than giving nutritious food daily. It is teaching them to make nutritious food themselves. So they can produce and make food themselves without depending on others, which is a great help.

-HFOMC, non-IG VDC, Darchula

Some regional, district, and VDCs level participants in FWDR mentioned that Brahmins traditionally do not eat meat or allow animals inside their houses but because of *Suaahara*, some Brahmins have started rearing hens and eating chicken eggs and meat. The participants have considered this behavior change as strength of *Suaahara*.

Most participants at the district and VDC levels, but none at the national and regional levels, mentioned that *Suahaara* has remarkable support on sanitation. Similarly, some participants such as *Suaahara* FS, CAC, and VNFSSC members in all VDCs pointed out that people were not aware of WASH issues before *Suaahara* started. They stated that there were no toilets and people were not aware about proper hand washing techniques until *Suaahara* taught hand washing techniques, provided materials for building toilets, and stressed sanitation.

Even though no questions about *Suaahara's* trainings were asked specifically in this study, *Suaahara* trainings were identified as a very strong aspect of *Suaahara*. The majority of participants mentioned that the trainings provided by *Suaahara* were useful. They also noted that *Suaahara* training was mostly related to nutrition, sanitation, and vegetable farming. Some district level participants representing livestock, agriculture, DDC, and water and sanitation reported that *Suaahara* had involved different sectors such as agriculture, livestock, WDO, education, and all other line agencies to take part in the training.

5.4 Challenges and Suggestions for Suaahara

While most participants at all levels appreciated *Suaahara's* work, some challenges and suggestions for *Suaahara* were also noted during the interviews for this study. A few participants at all levels stated that selection of local NGOs and the political pressure that came with it was challenging. Similarly, a RNFSSC representative in FWDR said that *Suaahara* itself is a challenging program because it has to implement across sectors and organizations. During the interviews, a very few district level participants that rather than *Suaahara's* activities being planned by USAID, this should take place at the VDC and district level and the ideas taken back up to the central level.

A few VDC level participants also noted that behavior change is difficult with the example of low use of toilets despite substantial investment in toilet construction and sanitation activities. Meanwhile, some participants at the VDC level in Darchula suggested that *Suaahara* should

continue its activities by increasing supervision and also mobilizing other field workers at the field level. Some VDC level participants representing members of VNFSSC, IPC, and HFOMC from Rupandehi shared that since nutrition results take a long time to be visible, *Suaahara* should be extended for another 5-6 years.

The challenge in the working process is that still people have not made toilet. We go today and tell them one thing and after 8-10 days we have to repeat the same thing. They don't start even if we go after 15 days. We have to go ten times to one person. We visit them ten times and tell them about its importance, the harmful effects it can have, the objectives and targets of the government. We have to teach them the whole process again. It is a challenge in the working process.

-VDC Secretary, non-IG VDC, Rupandehi

Suaahara program must be sustainable. Sustainable means more 5 -10 years, 20 years. It would be good if it is continued. It should be spread widely. We must think about how to provide information to second generation of pregnant women "supportively". This program is going to end. Suaahara must think how to move ahead.

- ASC Representative, Sindhupalchowk

Many participants at all levels frequently stated geographical inaccessibility as a challenge for *Suaahara*. Most participants in Darchula and Sindhupalchowk mentioned that geographical conditions create difficulties to transport hens and vegetable seeds from Kathmandu as they have to walk for long hours to reach some communities. Because of geographical inaccessibility, the representatives of some of the offices such as agriculture, *Suaahara* district offices, and livestock suggested that *Suaahara* should increase the number of staff for its information and services to reach everywhere. They suggested recruiting 1 person in each remote ward.

Lack of government ownership of the *Suaahara* was reported by many participants at the national, regional, and district levels. The FHD representative at the national level said that meetings were inadequate because *Suaahara* has not been able to transfer their technical capabilities and the district team has not been able to take ownership as much as it should have been. A *Suaahara* representative in FWDR said that people did not accept *Suaahara* because of the perception that the government should run programs on its own without NGOs.

Furthermore, a few participants in Rupandehi noted that different sectors do take equal responsibility and ownership of the program. At the same time, a very few regional level participants and some district level participants suggested that *Suaahara* come through the GoN's Redbook for increased ownership among government stakeholders. They also stated that local authority should take the ownership in order to make the services more effective.

The "challenge" of Suaahara is that it has to increase its established "ownership". There is a little weakness in the "ownership" from the community level to district level. The "ownership" has to be increased. The program has to be based on "felt needs". It has to be done based on priority rather than "tailor made" ". It has to know what the "community" "feels". These "modalities" have to be given and told that there are these "options" "feasible" for this place. The "intervention" has to be done according to the "modality" in that place [rather than being tailored from center].

-DPHO representative, Rupandehi

CHAPTER 6: DISCUSSION AND CONCLUSION

This PEGS study was conducted to examine Nepal's policy environment and governance structures related to nutrition. Specifically, the primary objective was to improve our understanding of how Nepal's policy environment and government structures at different levels affect the coordination and implementation of integrated nutrition programs, such as *Suaahara*, and also how *Suaahara* coordinates with and influences these policy environment and government structures. This included analyzing government and non-government institutions, actors, processes, structures, and the nature of coordination among them at national, regional, district, and VDC levels.

The MSNP has been generally understood by few government participants as bringing different sectors together for addressing issues of malnutrition. The NFSSCs were functioning to varying degrees at the regional, district, and VDC levels. Committee meetings at district and VDC levels were infrequent and the members didn't have a uniform understanding about the frequency of the meetings within and between the districts. In the committee meetings, they discuss and review nutrition, *Suaahara* activities, budget allocation for nutrition, and joint monitoring and supervision. The RNFSSC in both regions were almost non-functional while district and VDC level committees were somewhat functional. Unfilled positions, short lasting posts, and some protocol issues relating to seniority and hierarchies all contribute to challenges in organizing meetings. The "architecture" proposed in the MSNP is also quiet on the structure at the regional level committee; probably why the regional level committees despite formation aren't functioning.

Suaahara has been a central feature in the formation and functioning of the NFSSCs. Most participants have said that Suaahara has taken initiative to form these committees in addition to already setting a context for it by actively working for improvement of nutrition of 1000 day mothers and children. At the VDC level, the participants had a feeling that they have understood the importance of nutrition for mother and children because of Suaahara and therefore the formation of the committee was easier. While the participants have acknowledged the role of Suaahara for formation and functioning of the committees, most Suaahara representatives and a few government representatives at the district level have also observed lack of ownership in the process. Since Suaahara took the initiation to form the committees, some members think that these are Suaahara committees and that meetings are held only when Suaahara requests. This poses a challenge to regular committee functioning and the over reliance on Suaahara is a particular challenge when the program phases out.

Another multi-sectoral committee, WASH committees were found to be active and highly functional at the regional, district and VDC levels and the participants mentioned that they are working according to National Sanitation Master Plan. The WASH committees are aiming to meet a target of Nepal being completely ODF by 2017 and this has also been linked with the performance of the government staff. The ODF campaign has been a national movement and thus, committees meet frequently and resources are being directed towards construction of toilets. The visibility of the committees could also be different because of the tangible outcome of the WASH committees; i.e. number of toilets constructed whereas the result in the improvement of nutrition is gradually seen.

WASH related participants have all stated that although their programs have indirect links for improving nutritional behaviour. Although these committees were formed prior to *Suaahara's* start, *Suaahara* has been an integral component of these committees and the ODF campaign throughout all study sites. Participants mentioned *Suaahara's* contributions to behavior change.

The participants of government agencies in the districts and VDC level noted that there has been improved coordination among them because Suaahara has created a platform to come together and learn about one another's work through the NFSSCs. However, the participants have also observed challenges in the multi-sectoral approach. The major challenges for multi-sector coordination have been identified as frequent transfers of staff, lack of elected representatives in the district and VDC level positions, few ASC and LSC at the VDC level, in addition to lack of equal ownership of the program from the government stakeholders. There were issues around nutrition as being only a health agenda item in the initial years and some participants still feel that the non-health sectors haven't yet owned up to nutrition as part of their agenda. The district and VDCs had further challenges as the LDO and VDC secretary have to chair most of the committees in absence of elected representatives which increases their workload. This also means that the meetings are dependent on the availability of these position holders as well. Further, the regularity of meetings also seems to rely on the financial allowance and/or provision of snacks, which reflects broader development practices. These challenges to MSNP implementation had been foreseen by the MSNP itself, and subsequent documents9 on Nepal's nutrition capacity which have been confirmed by this study as well. This calls for the attention of the policy makers to enable a conducive environment for smooth scaling up of the MSNP in other districts.

As suggested by the MSNP, the local governance bodies such as CAC and WCF in the study sites were found to be sensitized on the issues around nutrition. The data suggests that the *Suaahara*

⁹ Houston et al. (2014). Pathways to Better Nutrition Case study; Shrimpton and Atwood. (2012). Nepal National and District Nutrition Capacity Assessment

is acting as a catalyst to ensure regular meetings, especially in the CAC and WCF and also prioritize discussion on nutrition related issues. Participants have frequently mentioned and the documents have evidenced *Suaahara*'s participation in CAC, WCF, and VDC planning meetings. At every stage of VDC planning, *Suaahara* is participating and pushing nutrition forward as an agenda, as a result of which numerous VDCs in the study districts were found to have allocated a certain amount for nutrition for 1000 day mothers and their children. The priorities in the CAC, WCF, and IPC and the budget allocated by the VDC, were however found to be majorly focused on physical infrastructures including road construction, building construction, drinking water and so on.

Since *Suaahara* has intensive governance activities targeted at the CACs only in few VDCs, the results show marked variation in the functioning of CAC in the *Suaahara* IG and the non-IG VDCs; the CACs of the IG VDCs in all 3 districts were a lot more active in terms of their knowledge and awareness about the functioning of CAC and their role in the VDC planning process except in Sindhupalchowk. While nutrition was discussed in all CACs, the discussion was more frequent and more detailed in the IG VDCs.

Suaahara seems to have made a space for itself in the nutrition sector and has earned the trust of both the government and the Nepali people in intervention areas. Its contributions to setting the stage for improvements in the nutritional well-being of 1000 day mothers and children has been acknowledged at all levels. The program has brought together different sectors working in nutrition and has initiated and facilitated continuous vertical and horizontal coordination for nutrition. The program has also promoted nutrition among different community level structures, sensitizing everyone at the local level as to the importance of nutrition for individuals, households, communities and Nepal. This has resulted in discussion on nutrition related topics and an increasing demand that budget funds be allocated for nutrition, during the government's annual planning process. While Suaahara seems to be functioning effectively, there is general concern that both government stakeholders and community people may now be over-reliant on Suaahara for nutrition and sanitation related activities, creating risks for sustainability of achievements. Therefore, there is greater need towards institutionalizing the MSNP within the government system and building capacity and mechanisms to create ownership for longer term and sustainable achievements. Even though the MSNP has been introduced as overall guiding document for nutrition sector, there is a stark need to align and integrate it with the sectoral programs and policies of the ministries involved so that the vision of the plan could be translated into practice. The larger problem of the country, the political instability, does affect the smooth implementation; however, constant engagement with all the stakeholders is crucial for the plan to be institutionalized.

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This study encompassed participants from national and sub-national levels and has attempted to represent voices of various stakeholders of nutrition sector. However, since this is a qualitative study with purposive sampling of the participants, the findings of the study is not generalizable. This study generates an understanding about the functioning along with the facilitators and barriers for multi-sector bodies. Even though the study has focused exclusively within the nutrition sector, it has also offered valuable lessons for other programs with multi-sectoral approach. The study also shows that a multi-sectoral program like *Suaahara* has far reaching benefits to bring improvement in people's health. The gains of this program need to be reflected in government's policies and programs. Similarly, as a way forward, *Suaahara* needs to continuously engage with the policy makers and program people at all levels to share lessons learnt and gaps identified, through workshops, meetings, policy briefs, advocacy, and so on for increased ownership of the MSNP within government bodies.

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ANNEX 1: RESEARCH TEAM

HERD's Core Research team

- 1. Dr. Sushil Chandra Baral- Executive Chairperson
- 2. Ms. Rekha Khatri- Qualitative Research Manager
- 3. Mr. Kapil Babu Dahal- Medical Anthropologist
- 4. Ms. Anju Bhatt- Senior Research Officer
- 5. Ms. Shraddha Manandhar- Research Officer
- 6. Ms. Amrita Ghimire- Project Officer
- 7. Ms. Sharmila Gautam- Translation Supervisor

HERD's Supporting team

- 1. Mr. Kumar Jung Malla- Operations Manager
- 2. Mr. Hom Nath Subedi- Program Manager
- 3. Mr. Ramesh Pathak- Finance Officer
- 4. Ms. Jyoti Limbu- Qualitative Research Officer
- 5. Mr. Kiran Devkota- Assistant Admin Officer

Suaahara team

- 1. Dr. Kenda Cunningham- Independent Consultant and Principal Investigator
- 2. Ms. Akriti Singh- Co-Principal Investigator
- 3. Ms. Femila Sapkota- Sr. Integrated Nutrition Coordinator, HKI

ANNEX 2: STUDY PARTICIPANTS FROM GOVERNMENT AND NON-GOVERNMENT ORGANIZATIONS AT ALL LEVELS

Sectors	National Regional (₁ region)		District (per district)	VDC (per VDC)	
Planning/ Local governance	NPC and MoFALD-	RNFSSC	DDC and DNFSSC	VDC Secretary, CAC Coordinator, Social Mobilizer, IPC Coordinator, VNFSSC, WCF executive committee members, and CAC member	
Health/ Nutrition	CHD, FHD, NHTC, and NHEICC	RHD	D/PHO	HFOMC secretary (health facility incharge)	
Agriculture	DOA	RAD	DADO	ASC	
Livestock	DoLS DoLS		DLSO	LSC	
WASH	DWSSD	R-WASH-CC	DWSSO, D- WASH-CC	V-WASH-CC	
Suaahara	National representative and <i>Suaahara</i> partners	Regional representative			

ANNEX 3: LIST OF INTERVIEW GUIDES USED

Level	Interview guides used	Types of guide in each level
National level	NPC, Line Agencies, and <i>Suaahara</i> representative	3
Regional level	 Coordinating bodies, Line Agencies, and Suaahara representative 	3
District level	 Coordinating bodies, Line Agencies, and Suaahara representative 	3
VDC level	 CAC and WCF, HFOMC, ASC, and LSC, IPC, Suaahara representative, and VDC Secretary 	5
Total		14

ANNEX 4: LIST OF DOCUMENTS REVIEWED

Level	Institution	Type of Document	No. of
			documents
National level (total:5)	NPC MoAD	MSNP Agriculture Development Strategy, 2014	1
	GoN	Food and Nutrition Security Plan (FNSP)	1
	don	Health Sector Strategy for addressing maternal under-	1
(30 33.3.5)	CHD	nutrition (2013-17) and National Nutrition Policy and	1+1
	0	Strategy	
D	RHD	Annual Report, Meeting Minutes, and Request letter by	1+1+15
Regional level- Doti (total: 29)		Suaahara to attend program/meeting	
Dou (total, 29)	R-WASH-CC	Meeting minutes	8
	RNFSSC	Meeting minutes	4
Regional level-	RHD	Annual Work Plan and Annual Report	1+3
Pokhara (total:	R-WASH-CC	Meeting minutes	1
9)	RNFSSC	Meeting minutes and Appreciation letter	1+1
,	DPHO	Opinion and feedback to Suaahara from DPHO	2
District level-	D-WASH-CC	Meeting minutes	18
Darchula (total:	DNFSSC	Meeting minutes and Letter	6+2
29)	DDC	Budget allocation sheet	2
	DHO	Annual Progress report	1
	D-WASH-CC	Meeting minutes	34
Diatwist lavel	DNFSSC DDC	Meeting minutes, Strategic plan Action Plan	7+1 3
District level- Rupandehi	DWSSO	Revised ODF Plan	1
(total:60)	DW330	Red Book, Annual report, Budget allocation, and Meeting	
(totalioo)	DHO	minute	1+3+1+1
	Various	Other letters	8
	DADO	Meeting minutes	1
	DIIO	Budget in nutrition promotion activities, Request letter for	1+1+1
Division 1	DHO	joint monitoring, and Budget allocation for nutrition	
District level- Sindhupalchow	D-WASH-CC	Meeting minutes and letter regarding ODF activities	12+1
k (total: 32)	DNFSSC	Meeting minutes	13
K (totali 52)	-	Letter from USAID	1
	TukiSanghSu	Activity report: Suaahara	1
	nkoshi		
	CAC	Meeting minutes	29
	V-WASH-CC	Meeting minutes	28
VDC level-IG	WCF	Meeting minutes an Appreciation letter	56+1
VDC, Darchula	VDC	VDC Council Minutes, Meeting minute, and VDC development	2+5+1
(total: 135)	VNFSSC	plan Meeting minutes	5
	IPC	Meeting minutes Meeting minutes and Budget allocation	6+1
	-	Minutes of campaign for ODF	1
	HFOMC	Meeting minutes	9
	VNFSSC	Meeting minutes Meeting minutes	6
	IPC	Meeting minutes	2
	CAC	Meeting minutes	16
VDC level- Non-	WCF	Meeting minutes	26
IG VDC,	V-WASH-CC	Meeting minutes	11
Darchula (total: 114)	HFOMC	Meeting minutes	9
111)	VDC	Letters, VDC council minutes	7+8
	ASC	Meeting minutes	3
	LSC	Letters	2
	Various	Letters	15
VDC level- Non-	VDC	VDC Council Minutes	3
IG VDC,	VNFSSC	Meeting minutes	4

No. of Level Institution **Type of Document** documents Rupandehi V-WASH-CC Meeting minutes (total:65) 48 CAC Meeting minutes WCF Meeting minutes 3 WCF Meeting minutes 80 V-WASH-CC Meeting minutes and letter 32+1 VDC level- IG CAC Meeting minutes and Name list 126+1 VDC, Rupandehi VNFSSC (total: 252) Meeting minutes 2 Meeting minutes and VDC council minutes VDC 1+9 **HFOMC** 6 Meeting minutes V-WASH-CC Meeting minutes and Appreciation letter 3+4 **VNFSSC** Meeting minutes 1 VDC level- Non-Joint monitoring meeting minutes and Interaction meeting 5+1 IG VDC. TukiSangh Sindhupalchow Letter regarding nutrition from health post 1 k (total: 24) Joint monitoring by DADO and LSC and Meeting minute with 1+1 LSC TukiSangh and DDC VDC **VDC** Council minutes 1 WCF Meeting minutes 13 V-WASH-CC Meeting minutes 25 VDC level- IG CAC Meeting minutes and Attendance record 2+11 VNFSSC Meeting minutes VDC, 5 Sindhupalchow Annual Review meeting 21 VDC k (total: 128) Meeting minutes and Budget allocation document 9+6 IPC HFOMC 21 Meeting minutes Meeting minutes, other letters, and action plan ASC 5+9+1 Total 882

ANNEX 5: FIELD RESEARCHER'S/HERD TEAM DETAILS

S.N	Name	Academic Qualification	Prior Experience in Qualitative Research (Yes/No)	Where the data collection was done
1	Rekha Khatri	MA in Social Work	Yes	National
2	Kapil Babu Dahal	MA in Anthropology; PhD in Anthropology(pursuing)	Yes	Regional, District, and VDC
3	Anju Bhatta	Master in Public Health (MPH)	Yes	National, Regional, District, VDC
4	Shraddha Manandhar	Bachelor in Public Health (BPH); MPH (pursuing)	Yes	National, District, and VDC
5	Angel BikramBista	ВРН	Yes (KII, FGD) ¹⁰	District and VDC
6	ArjunShiwakoti	ВРН	Yes (IDI, FGD, Shadowing)	National, Regional, District, and VDC
7	BinodYadav	ВРН	Yes (IDI)	District and VDC
8	Bipin Singh	ВРН	Yes ((KII), IDI)	District and VDC
9	Buddhi Narayan Shrestha	Bachelor of Business Studies	Yes (FGD, Shadowing, KII)	District and VDC
10	Jamuna Lama Gurung	ВРН	Yes (IDI, FGD)	District and VDC
11	Manju KC	Bachelor in Humanities (Sociology and English)	Yes (FGD, IDI)	District and VDC
12	Munna Lama	Bachelor of Arts (Humanities)	Yes (IDI, FGD)	District and VDC
13	Pankaj Kumar Deo	Bachelor of Education (Health)	Yes (FGD, KII)	District and VDC
14	PrakritiKhanal	ВРН	Yes (IDI, FGD)	District and VDC
15	RabinaRai	ВРН	Yes (FGD,	District and VDC

¹⁰ KII: Key In-depth Interview, FGD: Focus Group Discussion

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Shadowing) Yes (IDI, FGD, Regional, District, and BPH 16 RajinaRai Shadowing) VDC Yes (FGD, District and VDC 17 RajitaDheke BPH Shadowing) Yes (IDI, FGD, National, Regional, RammaniLamsal BPH 18 Shadowing) District, and VDC 19 RoshanPoudel BPH Yes (IDI, FGD) District and VDC 20 Ram Ishwar Ray Yadav Master of Science (Maths) Yes (IDI, FGD) District and VDC Bachelor of Science Yes (FGD, District and VDC 21 SanjibRijal (Physics) Shadowing) Yes (IDI, FGD) 22 SantuPsd. Yadav Masters in Management District and VDC Regional, District and 23 BPH Yes (FGD) SurajBaniya VDC Yes (FGD, National, Regional, 24 UshaAdhikari Intermediate of Commerce Shadowing) District, an VDC Out of the 24 researchers selected for the training, 4 dropped out during or after the training. Their names are presented below along with reason for drop out Qualification S.N. Name Reason for dropout Mr. Khadka's father had BPH, Experience in FGD 25 Anup Singh Khadka passed away soon after and KII. the training. Ms. Subedi received an BPH, Experience in FGD 26 IllikaSubedi opportunity for higher and IDI studies abroad. Ms. Joshi met with an BPH, Experience in accident during the 27 Lalita Joshi FGD, KII and IDI training; therefore she was unable to continue. Mr. Shrestha received a BPH, Experience in FGD 28 SumanShrestha full time job opportunity and IDI elsewhere.

ANNEX 6: TRANSLATORS' DETAILS

S.N.	Name	Prior Translation Experience	Academic Qualification	Transcripts completed
1	Uma ShahiThakuri	Yes, (with HERD)	ВРН	38
2	SangeetaKoirala	Yes, (with HERD)	ВРН	29
3	Sonia Awale	Yes, (with HERD)	ВРН	4
4	Bandhana Bhandari	No	ВРН	5
5	Sunita Neupane	No	Master of Arts(English)	9
6	Neha Shrestha	Yes, (with HERD)	ВРН	5
7	Choden Lama Yonzon	No	ВРН	1.5
8	Monica Manandhar	No	ВРН	14
9	Anjel Bikram Bista	Yes, (with HERD)	ВРН	3
10	Mina Maden Limbhu	No	ВРН	7
11	Ashmita0jha	No	ВРН	3
12	Priyanka Pandey	No	BBS	3
13	Pratibha Pandey	No	ВРН	9
14	Jyoti Praksh K.C	No	ВРН	0.5